Michigan State Youth Soccer Association

OFFICIAL MSYSA FORM

THIS FORM MUST BE PRINTED OR TYPED AND RETURNED WITH PAYMENT TO THE MSYSA STATE OFFICE AT 9401 GENERAL DRIVE, SUITE 120, PLYMOUTH, MI 48170.

LEAGUE AFFILIATION APPLICATION (Due Every Fall Season)

☐ Fall Season Submission **($50 Fee)** ☐ New League Application **($50 Fee)** ☐ League Officer Update **(No Fee)**

CASH WILL NOT BE ACCEPTED. CHECKS MUST BE MADE PAYABLE TO MSYSA.

FIVE DIFFERENT OFFICERS MUST APPEAR BELOW.

☐ Check if new/ different from last season

LEAGUE NAME:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) WEBSITE:

OFFICERS:

☐ Check if new/ different from last season

PRESIDENT:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

☐ Check if new/ different from last season

VICE PRESIDENT:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

☐ Check if new/ different from last season

SECRETARY:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

☐ Check if new/ different from last season

REGISTRAR:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

☐ Check if new/ different from last season

TREASURER:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

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DELEGATE TO MSYSA:

This individual will receive mailings along with the league President. If you do not designate a Delegate, the President will only receive mailings to your league.

☐ Check if new/ different from last season

DELEGATE:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

RISK MANAGEMENT COORDINATOR:

☐ Check if new/ different from last season

RM COORDINATOR:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

OTHER OFFICERS:

☐ Check if new/ different from last season

NAME: POSITION:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

☐ Check if new/ different from last season

NAME: POSITION:

ADDRESS:

CITY/STATE/ZIP

PHONE #: ( ) FAX #: ( ) EMAIL:

☐ I agree to update all the necessary League Officers (if applicable) on the MSYSA website by logging into the E-Registration and clicking the link "President and League Deledgate Info".

COMMITMENT STATEMENT

Our League hereby applies for membership in the Michigan State Youth Soccer Association (MSYSA). Our Bylaws are based upon and do not conflict with the MSYSA Bylaws. We agree to adhere to and support the MSYSA Constitution and Bylaws, Playing Rules and Regulations, Policies and Procedures, and fee structure set forth by the MSYSA. We further understand failure to comply with Small-Sided Games will result in forfeiture of our league's ability to participate in all state-run, sanctioned, and sponsored tournaments and programs.

Signature & Title _____ Date _____

For Office Use Only:

Date Received: _____ Check Number: _____ Amount: _____