APPLICATION TO BECOME A COLORADO SOCCER ASSOCIATION MEMBER

Name of Applying Club:

Designated Official of Applying Club:				EST. 1978
Title:	Phone: ()	- Email:		
Address:				
	City	State	Zip	

PART I.

Application Checklist (The following items must be submitted at time of application – any false, missing or inaccurate information WILL disqualify application from review and potential approval. If you are unable to provide an item below, a request for waiver must be requested and approved by the CSA Board before Membership Committee may continue to review application.

- 1. Copy of club rules & procedures, constitution, and by-laws
- 2. 501(C)(3) non-profit status application
- 3. Board of Director's list name and contact information *see Appendix A
- 4. Player list, including name, DOB and address of at least sixty-five (65) players, of which 20 players have not been registered as players with Colorado Soccer or US Soccer in the twelve months preceding application. Mergers of existing clubs are specifically excluded from the sixty-five-player requirement.
- 5. An application fee in the amount of \$1,000.00. (Non-refundable \$500 is due at the time of application submission and an additional \$500 due at the time of member's acceptance into Colorado Soccer Association)

Pursuant to CSA Bylaw X.D, The Board of Directors may waive one or more membership requirements for a new soccer club, which it determines, has applied in good faith, and demonstrates compelling cause for the creation of a new CSA member soccer club within the club's declared community. Requests for waivers of any membership requirement must be filed in writing with the Association's Membership Committee by the last day of February of the calendar year in which the applying Voting Member wishes to begin seasonal year Fall play.

PART II.

Application Questions – Questions below should be answered accurately and completely, as they will be reviewed and factored into the membership committee's decision to recommend or not recommend approval to the CSA Board of Directors.

- 1. Location of applying club:
- 2. Mission and Vision Statements for the applying club:
- 3. Field availability:
 - a. What field(s) will be designated for home games and trainings?
 - b. Is another CSA member club(s) currently using any of these fields? (if yes, state which fields):
 - c. Approved field usage documentation must be provided for membership to be granted.
- 4. Are there any CSA member clubs currently in the area you are scheduling to serve?
 - a. If you answered yes above, which programs will be offered that are **not** currently being offered by the existing clubs?
 - b. If you answered yes above, please indicate a **<u>compelling argument</u>** indicating why your programs should be offered in that same area.
- 5. List of key employees and their experience relevant to operating a soccer organization. See Appendix B.
- 6. Are any of your employees listed above currently employed or coaching for another CSA member club? If yes, which employee and which club is he/she employed or coaching for. See Appendix B
- 7. Please describe the plan for managing and developing new referees for the applying club.
- 8. Please identify or provide an action plan for establishing a recreation soccer program for minors under 11 years of age.

9.	Provide a	financial	stability	plan to	include a	1-year, 2-	year and 3	-year budget.
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10. Have you or any member of your program applied to CSA for membership before?

Signature of Designated Club Official	Date

*Pending approval, new member club must adopt CSA's Risk Management program to include SafeSport, concussion training and background checks for all board, executives, part-time/full-time staff and contracted employees within 1st month of probationary period.

*New Clubs must abide by all CSA rules and regulations: CSA Bylaws, Rules & Procedures and Policies can be found on our website at http://www.coloradosoccer.org/resources/bylawsrules/

Completed application and other required attachments may be emailed to LStibley@coloradosoccer.org or mailed to: Colorado Soccer Association 385 Inverness Parkway, #190 Englewood, CO 80112

^{*} All applications must be submitted by the last day of February to qualify for membership in the following Fall; or by the last day of September to qualify for membership in the following Spring.

^{*}Upon their discretion, the Colorado Soccer Association Board of Directors reserve the right to withhold approval of any club applications they believe are not in the best interest of CSA's players or existing members. All new Voting Members approved by the Board of Directors shall serve a two-year probationary period with annual reviews by the Membership Committee.

President Phone: Email: Name: **Duties & Description:** experience relevant to operating a soccer organization: Vice President Name: Phone: Email: **Duties & Description:** experience relevant to operating a soccer organization: Email: Secretary Name: Phone: Duties & Description: experience relevant to operating a soccer organization: Treasurer Name: Phone: Email:

Board of Directors

Director	Name:	Phone:	Email:	
Duties & Description:				
experience relevant to operating a soccer organization:				

Duties & Description:

experience relevant to operating a soccer organization:

Appendix B

CLUB DIRECTORS AND STAFF

Executive Director	Name:	Phone:	Email:		
Duties & Description:					
Experience relevant to operati	ng a soccer organization:				
currently employed or coachin	g for another CSA member club? If	yes, which one?			
		T			
Administrator	Name:	Phone:	Email:		
Duties & Description:					
Experience relevant to operati	ng a soccer organization:				
Currently employed or coachir	ng for another CSA member club? It	f yes, which one?			
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Registrar	Name:	Phone:	Email:		
Duties & Description:					
Experience relevant to operati	ng a soccer organization:				
Currently employed or coachir	ng for another CSA member club? If	yes, which one?			
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Certified Referee Assignor	Name:	Phone:	Email:		
Duties & Description:					
Experience relevant to operati	ng a soccer organization:				
Currently employed or coachir	ng for another CSA member club? It	f yes, which one?			
Risk Manager	Name:	Phone:	Email:		
Duties & Description:					
Experience relevant to operating a soccer organization:					
Currently employed or coaching for another CSA member club? If yes, which one?					
DOC	Name:	Phone:	Email:		
Duties & Description:					
Appropriate Training and Licensing:					
Currently employed or coaching for another CSA member club? If yes, which one?					

Coach	Name:	Phone:	Email:	
Training and Licensing:				
Level of teams to be coached	:			
Currently employed or coachi	ng for another CSA member club? I	f yes, which one?		
Coach	Name:	Phone:	Email:	
Training and Licensing:				
Level of teams to be coached	:			
Currently employed or coachi	ng for another CSA member club? I	f yes, which one?		
Coach	Name:	Phone:	Email:	
Training and Licensing:				
Level of teams to be coached	:			
Currently employed or coachi	ng for another CSA member club? I	f yes, which one?		
Coach	Name:	Phone:	Email:	
Training and Licensing:				
Level of teams to be coached	:			
Currently employed or coaching for another CSA member club? If yes, which one?				
Coach	Name:	Phone:	Email:	
Training and Licensing:				
Level of teams to be coached:				
Currently employed or coaching for another CSA member club? If yes, which one?				
Coach	Name:	Phone:	Email:	
Training and Licensing:				
Level of teams to be coached:				
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