



HAWAII YOUTH SOCCER ASSOCIATION  
P.O. Box 31286  
Honolulu, Hawaii 96820

# HYSA Volunteer Disclosure & Membership Form

**FOR LEAGUE USE ONLY**  
 TRANSFER  
 NEW  
 REREGISTRATION  
 CHANGE/CORRECTION

This Form Must be Completed by ALL Coaches & Administrators

League Name \_\_\_\_\_ Age Group \_\_\_\_\_ Div. \_\_\_\_\_

Club/Team \_\_\_\_\_

(USE CODE ONLY) Region \_\_\_\_\_ State \_\_\_\_\_ District \_\_\_\_\_ League \_\_\_\_\_ Club \_\_\_\_\_ Team \_\_\_\_\_ Recreational = R Competitive = C

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Area Code \_\_\_\_\_ Telephone Number \_\_\_\_\_ Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Male = M Administrator = A Coach's License Level \_\_\_\_\_  
 Fem = F Coach = C

Email Address \_\_\_\_\_ Coaching License Level & Number \_\_\_\_\_

Social Security Number \_\_\_\_\_ Driver's License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Previous Address (if Current Address is less than 5 years)  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

POSITION IN HYSA Check all that apply.	Please answer the following questions. Failure to answer or intentionally falsifying information are grounds for automatic denial of membership or disqualification.
<input type="checkbox"/> Head Coach <input type="checkbox"/> Asst. Coach <input type="checkbox"/> Team Manager <input type="checkbox"/> Team Assistant <input type="checkbox"/> Team Parent <input type="checkbox"/> Director of Coaching <input type="checkbox"/> Asst. Director of Coaching <input type="checkbox"/> Board Member <input type="checkbox"/> Referee <input type="checkbox"/> Committee Member <input type="checkbox"/> Other, Please Explain	<p>1. Have you ever been convicted of a crime, including a DUI? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>2. Do you have a history of alcohol abuse or the use of illegal drugs? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>3. Do you have a history of child abuse or sexual misconduct involving a minor? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>4. Other than the above, is there any other information that casts serious doubt on your ability to be entrusted with the supervision, guidance, and care of minor children? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>5. Have you ever been denied membership into HYSA (include instances that have been appealed)?            Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If you have answered yes to any of the above question, please attach a sheet of paper and explain.            (Note: Even if previously cleared by HYSA, you must disclose the above, each time this form is submitted.)</p>

**I UNDERSTAND THAT:**

A. It is the policy of USYS/HYSA and its member leagues to exclude or deny membership to persons convicted of certain crimes or whose prior history includes sexual misconduct, abuse of alcohol, use of illegal drugs, or conduct that casts serious doubt on my ability to be entrusted with the supervision, guidance, and care of minor children.

B. In applying for a USYS/HYSA or league position, the accuracy and completeness of the information that I have furnished on this form is subject to verification, which may include a criminal background and history check.

C. If admitted as a member, I hereby agree to abide by FIFA, USSF, HYSA/USYS league, and club By-laws, rules, regulations, policies, and procedures. I further agree that it is my responsibility to know and understand the aforementioned. I submit this form of my own free will.

D. As a member, I will notify HYSA as soon as possible of any additional convictions occurring and failure to do so may result in my immediate suspension and/or other possible sanctions.

Signature of Applicant: \_\_\_\_\_

Print Name	_____	Date	_____
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**FOR HYSA USE ONLY**

Fee Rec'd:  Yes  No

CK# \_\_\_\_\_ CASH? \_\_\_\_\_

Background Ck:  Yes  No

Status: \_\_\_\_\_ Date \_\_\_\_\_

Entered in Computer  
 Yes  No

Date Entered \_\_\_\_\_

Pass Iss'd  Yes  No

Date Mailed: \_\_\_\_\_