



ORGANIZATION FEES
ANNUAL MEMBERSHIP - \$30

SOUTH CAROLINA YOUTH SOCCER

State Association Member of US Youth Soccer and of the Federation



AFFILIATED ORGANIZATION REGISTRATION FORM

ORGANIZATION NUMBER		SEASONAL YEAR	
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INITIAL APPLICATION	
YEARLY RENEWAL	
501 STATUS	
501-C3 STATUS	

REQUIRED IF INITIAL APPLICATION
<i>I certify that this information has been reviewed.</i>
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<i>SC Youth Soccer Rules & Compliance Officer</i> <i>Date</i>

ORGANIZATION LEGAL NAME & ADDRESS		
LEGAL NAME		
ADDRESS		
CITY/STATE/ZIP		
E-MAIL	TELEPHONE	

GENERAL INFORMATION TO APPLICANTS:

- ANY YOUTH SOCCER ORGANIZATION WITHIN THE STATE OF SOUTH CAROLINA MAY APPLY FOR AFFILIATION in the South Carolina Youth Soccer by submitting for approval of the South Carolina Youth Soccer Board of Directors properly executed Bylaws and Operating Rules along with this completed form by June 1st prior to the seasonal year in question.
- Submission of this form is an annual requirement, and all presently affiliated organizations must refile by June 1 of each year.
- All affiliated organizations must register every individual player, coach, team and administrator in their organization who participates in any South Carolina Youth Soccer program in accordance with the South Carolina Youth Soccer Rules.
- The South Carolina Youth Soccer provides accident insurance for every player/coach that is properly registered in one of its affiliated organizations.
- All affiliated organizations must abide by the South Carolina Youth Soccer/US Youth Soccer/USSF/FIFA rules and pay all amounts owed when due.
- Each organization requesting affiliation must submit the following along with this form:
 - Current copy of its bylaws and operating rules a (new - by June 1st / renewal - only if changes occurred).
 - Complete listing of all officers, to include: Title, Name, Street Address, City, State, Zip Code, Home/Work/Fax Telephone and **E-mail address**.
- Appropriate fees will be billed by SCYSA; additional processing fees will be charged for incomplete or inaccurate information submitted on this or any other transaction and may delay approval or timely processing.

APPROVED	<i>Reason if Rejected:</i>
REJECTED	

(Revision 6/2009)

I certify that this information is true and correct.

I certify that this information has been received.

CLUB Registrar

Date

South Carolina Youth Soccer State Registrar/Designee

Date