



***RISK MANAGEMENT
COMPLIANCE FORM***



Due date: October 1, 2009

CLUB NAME: _____

CLUB NUMBER: _____

CLUB PRESIDENT: _____
(print)

I certify that every coach, administrator, and volunteer for the above named Club has completed an SCYSA *Volunteer Disclosure Statement* and these forms have been submitted to the SCYSA State Office on or before October 1, 2009. Failure to do so will result in fines and/or sanctions. Also, my Club will continue this process with all new personnel registering or volunteering for the seasonal year 2009 /2010.

President

Date