

# CDYSL APPLICATION FOR MEMBERSHIP

- 1) Name of Club: \_\_\_\_\_  
Name of person submitting application: \_\_\_\_\_  
Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_\_ email address: \_\_\_\_\_
- 2) Level of membership applying for:  
Full Member \_\_\_\_ Associate Member \_\_\_\_ Affiliation Member \_\_\_\_
- 3) Why does your organization want to be a member of CDYSL? (use back if you need more room)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 4) Does your club reside within the geographic boundaries of CDYSL? Yes \_\_\_\_ No \_\_\_\_  
If No, please indicate if you have been released from the state organization that your club's teams are registered and who that state organization is:  
Released: Yes \_\_\_\_ No \_\_\_\_ Organization: \_\_\_\_\_
- 5) Did you attach your letter of intent and initiation fee? Yes \_\_\_\_ No \_\_\_\_  
Does it include brief description of the club, the community where they are located and the expectations for the growth of soccer within the club? The officers and or key leaders of the club including address, email addresses and phone numbers.
- 6) Did you attach your clubs organizational structure of the club, including bylaws and other documents requested by the Membership Committee? Yes \_\_\_\_ No \_\_\_\_
- 7) Do you intend to have paid coaches? All \_\_\_\_ Some \_\_\_\_ None (all volunteer) \_\_\_\_
- 8) Describe your geographical territory from which the club plans to recruit and or service players.  
\_\_\_\_\_
- 9) Check the types of teams your club will be supporting:  
Travel indoor \_\_\_\_ Travel outdoor \_\_\_\_ Intramural (recreational) teams \_\_\_\_ TOPS \_\_\_\_
- 10) If supporting travel outdoor teams indicate the age, gender for each proposed level of play:

**(Indicate approximate number of teams at each level)**

Number of Premier teams playing: in a premier league; in premier division; in the highest CDYSL div available for this travel team's age group. \_\_\_\_

Co-ed: U8 \_\_\_\_

Gender Male Only Teams Age groups:

U8 \_\_\_\_ U10 \_\_\_\_ U11/U12 \_\_\_\_ U13/U14 \_\_\_\_ U15/U16 \_\_\_\_ U17 \_\_\_\_ U18/U19 \_\_\_\_

Gender Female Only Teams Age groups:

U8 \_\_\_\_ U10 \_\_\_\_ U11/U12 \_\_\_\_ U13/U14 \_\_\_\_ U15/U16 \_\_\_\_ U17 \_\_\_\_ U18/U19 \_\_\_\_

**Travel Div 1** \_\_\_\_ High level of play but not considered a premier team by the games committee

Co-ed: U8 \_\_\_\_

Gender Male Only Teams Age groups:

U8 \_\_\_\_ U10 \_\_\_\_ U11/U12 \_\_\_\_ U13/U14 \_\_\_\_ U15/U16 \_\_\_\_ U17 \_\_\_\_ U18/U19 \_\_\_\_

Gender Female Only Teams Age groups:

U8 \_\_\_\_ U10 \_\_\_\_ U11/U12 \_\_\_\_ U13/U14 \_\_\_\_ U15/U16 \_\_\_\_ U17 \_\_\_\_ U18/U19 \_\_\_\_

# CDYSL APPLICATION FOR MEMBERSHIP

**Travel Div 2** \_\_\_\_ Competitive team but not at the same level as Travel Div 1.

Co-ed: U8 \_\_\_\_

Gender Male Only Teams Age groups:

U8 \_\_\_\_ U10 \_\_\_\_ U11/U12 \_\_\_\_ U13/U14 \_\_\_\_ U15/U16 \_\_\_\_ U17 \_\_\_\_ U18/U19 \_\_\_\_

Gender Female Only Teams Age groups:

U8 \_\_\_\_ U10 \_\_\_\_ U11/U12 \_\_\_\_ U13/U14 \_\_\_\_ U15/U16 \_\_\_\_ U17 \_\_\_\_ U18/U19 \_\_\_\_

**Travel Div 3+** \_\_\_\_ Competitive teams but tend to play more geographical teams.

Co-ed: U8 \_\_\_\_

Gender Male Only Teams Age groups:

U8 \_\_\_\_ U10 \_\_\_\_ U11/U12 \_\_\_\_ U13/U14 \_\_\_\_ U15/U16 \_\_\_\_ U17 \_\_\_\_ U18/U19 \_\_\_\_

Gender Female Only Teams Age groups:

U8 \_\_\_\_ U10 \_\_\_\_ U11/U12 \_\_\_\_ U13/U14 \_\_\_\_ U15/U16 \_\_\_\_ U17 \_\_\_\_ U18/U19 \_\_\_\_

11) Location(s) and number of the field(s) to be used by the club. Number of fields: \_\_\_\_

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12) Are these fields to be shared with other CDYSL member clubs? Yes \_\_\_\_ No \_\_\_\_

If yes please give name of other member club(s).

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Have you contacted the other member club(s)?

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13) The colors of the club and uniforms:

Club: \_\_\_\_\_ Uniforms: Primary Colors: Jersey \_\_\_\_\_ Shorts \_\_\_\_\_

Alternate colors: Jersey \_\_\_\_\_ Shorts \_\_\_\_\_

14) Prospective new club must recruit 1 new referee for every three (3) travel teams to be registered. If the club is remote their willingness to supply referees for all games. Please initial your agreement with this statement:

Initials \_\_\_\_\_

**Please sign below indicating that the information you have supplied above is true and accurate to the best of your ability.**

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**Print name of person signing**

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