



PYSC Referee Application

Please fill in all information in word processor, print, sign and date application



FIRST NAME		INITIAL	LAST NAME	
STREET ADDRESS¹				
CITY			STATE	ZIP
			WI	
HOME PHONE	()	-	WORK PHONE	() - (ext.)
DATE OF BIRTH (MM - DD - YYYY)	AGE	SOCIAL SECURITY NUMBER		YEARS LIVED AT ABOVE ADDRESS¹
- -		- -		
DRIVER LICENSE #			STATE ISSUED	EXPIRATION (MM - DD - YYYY)
				- -
EMAIL			FAX	() -

¹ If residence at above address for less than five years, please indicate prior address

STREET ADDRESS				
CITY			STATE	ZIP
HOME PHONE	()	-	YEARS LIVED AT ABOVE ADDRESS	

* PERSONAL HISTORY			<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been found guilty by a court or other tribunal to have committed a violent act against another person, engaged in any misconduct involving a juvenile OR been convicted of a crime except for a minor traffic violation? (<i>Check one</i>)			YES	NO
I am a returning referee. <input type="checkbox"/> YES <input type="checkbox"/> NO My PERSONAL HISTORY <input type="checkbox"/> HAS <input type="checkbox"/> HAS NOT changed since last year.				

SAY or PYSC, at their discretion, may use the above information to conduct a criminal background check regardless of the response on "Personal History"

As an applicant for a Soccer Association for Youth (SAY), Pulaski Youth Soccer Club (PYSC) referee position, I hereby attest to the truthfulness of the representations I have made, including the information provided in response to the questions regarding my criminal history. I authorize SAY or PYSC to verify the above information and waive any right to confidentiality with respect to the information requested. If requested by SAY or PYSC, I will submit my fingerprints for that purpose.²

Applicant Signature

Date

AREA USE ONLY		_____ AREA VOLUNTEER ADMINISTRATOR Must be signed if a "YES" Response in Personal History _____ Date
Say Area:	Pulaski Youth Soccer Club	

² Background checks are performed on individuals who are 19 years of age or older