



MINNESOTA YOUTH SOCCER ASSOCIATION
DISCLOSURE AND CONSENT FORM

Please Print or Type
Use additional pages needed

Club: _____

Applicant's Full Name: _____
First Middle Last

Birth date: _____ Driver's License No. _____
mm/dd/yr

Maiden, Former Name or Alias: _____

Current Address: _____
No. Street Unit/Apt. No.
City State Zip

Prior Addresses if less than
10 years at above address: _____

Gender: M F Phone Number: _____

Are you a (check all that apply): Coach ___ Trainer ___ Manager ___ Volunteer ___
MYSA/Club Board Member ___ Other (Please define) _____

Please read the following statement and initial in the space after the statement:

I hereby authorize MYSA and/or its agents to conduct a background check based on
the information provided on this form. I understand that subsequent background
checks may be run as a follow up to the preliminary check if negative information is
revealed. I also understand that failure to complete this form or providing false or
misleading information will result in the denial of my ability to be a coach, trainer,
manager, volunteer or board member of MYSA or its affiliate clubs.

Date: _____ Initials _____

Please answer the following questions:

- 1. Have you been convicted of any of the crimes (In Minnesota or elsewhere) listed
on page 2 of this form? NO ___ YES ___ (Please read and initial on the
reverse side. Please attach an explanation for any conviction.)
2. Have you ever been found liable for civil damages or penalties involving sexual
or physical abuse? NO ___ YES ___ (Please attach an explanation)
3. Have you had parental rights terminated for sexual or physical abuse of children?
NO ___ YES ___

Before signing, be sure that you have provided the required information and all
questions have been answered.

Dated: _____ Signature: _____

Notary: _____ [stamp]

Note to Notary: By signing this document you are verifying that you have been shown
picture id for identification and date of birth verification.

Convictions of the following crimes will mean you are not able to be a coach, trainer, team manager, board member or volunteer having significant contact with players registered with MYSA under the Player Protection Policy (please indicate which crime and attach an explanation):

<i>Murder</i>	<i>Manslaughter</i>	<i>Criminal Sexual Conduct</i>
<i>Felony Assault</i>	<i>Any assault against a minor</i>	<i>Child Pornography</i>
<i>Child Abuse</i>	<i>Controlled Substance Crimes against a minor victim</i>	
<i>Solicitation of a Minor to Engage in Sexual Conduct</i>		<i>Kidnapping</i>

Convictions of the following crimes will mean you may not be allowed to be a coach, trainer, team manager, board member or volunteer having significant contact with players registered with MYSA or in having conditions/restrictions placed on you that must be followed (please indicate which crime and attach an explanation):

<i>Felony theft</i>	<i>Violation of Restraining Order</i>	<i>Child Neglect</i>
<i>Felony DUI</i>	<i>Assault</i>	<i>Malicious Punishment of a Child</i>
<i>Controlled Substance Crimes</i>		<i>Domestic Assault or Abuse</i>
<i>Indecent Exposure</i>	<i>Harassment</i>	<i>Embezzlement</i>
<i>Contributing to the Delinquency of a Minor</i>		

To further protect your privacy if you answered yes to the questions on page 1, you may send this form to MYSA directly at the following address: MYSA, ATTN: Vice President of Administration, 11577 Encore Circle, Minnetonka, MN 55343. However, after the background check is performed and you are allowed to participate, the form will be forwarded to your club registrar for registration. Remember, your pass will be delayed by mailing it to the MYSA office and will not be available with the team passes.

In addition to the above crimes, MYSA policy states that a person may be disqualified from serving if MYSA obtains verifiable information that the individual completing this form:

1. Has been convicted (even if the record is expunged or entered a plea of no contest) of a crime against a minor or a crime that indicates the person may pose a risk to the health, safety and/or well being of players.
2. Has provided false information in completing this form.
3. Has been requested to leave, resign or was terminated from a position due to complaints of physical or sexual abuse of minors.
4. Has been found liable for civil damages or penalties resulting from the physical or sexual abuse of a minor.

NOTE

- A. MYSA or its members will require this form on an annual basis (soccer year) and will run periodic checks on everyone who completes a form and registers.
- B. You can request a hearing to challenge a negative decision.
- C. The results will not be released by MYSA to anyone unless ordered to by a court.

Date: _____ Signature: _____