



REGISTRATION ORDER FORM

Mail Orders to:
 AYSO Registration
 12501 Isis Ave
 Hawthorne, CA 90250

To Order by Phone
 (310) 643-6455 or
 (800) USA-AYSO
 (310) 643-5310 fax

SECTION _____ **AREA** _____ **REGION** _____

Order date _____ Day Phone # (_____) _____

Membership Year _____ Registration date: _____

Authorized Signature _____

SHIPPING INFORMATION:

SHIP TO _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

Ship Date _____ Weight _____

Ship Via _____ Charges _____

PRE-PRINTED REGISTRATION FORMS (no charge)	
Pre-Printed Registration forms sorted by:	
<input type="checkbox"/> Alphabetical	
<input type="checkbox"/> Gender/Alphabetical	
<input type="checkbox"/> Gender/Division/Alphabetical	
<input type="checkbox"/> Gender/Age/Alphabetical	
<input type="checkbox"/> Zip code/Alphabetical	
<input type="checkbox"/> School code/Alphabetical	
<input type="checkbox"/> Division/Alphabetical	
Special instructions: _____	

REGISTRATION KIT containing blank registration forms for players and volunteers must be ordered by the regional registrar or RC. To order contact the Registration Dept. at ext. 5465.	
FOR OFFICE USE ONLY:	
<input type="checkbox"/> Player continuous forms	Qty _____
<input type="checkbox"/> Volunteer continuous forms	Qty _____
<input type="checkbox"/> Youth Volunteer forms	Qty _____
<input type="checkbox"/> 18 year old player forms	Qty _____

PLAYER		VOLUNTEER		DESCRIPTION		
Labels		Labels		Sorted also by zip code		Y/N
				Alphabetical		
				Division/Alphabetical		
				Sex/Alphabetical		
				Sex/Division/Alphabetical		
				Team code/Alphabetical		
				School code/Alphabetical		
				Alphabetical by family		
				All coach/Alphabetical		
				Certified coach/Alphabetical		
				All referee/Alphabetical		
Member ID Cards (2 part sets)				<input type="checkbox"/> Players	<input type="checkbox"/> Volunteers	
				Certified referee/Alphabetical		
				All volunteers/Alphabetical		
Specify:				Others (please specify):		
For Office Use				Order #: _____ Ship by: _____		



**REGISTRATION CONTROL SHEET
PLAYER FORMS**

Section: _____ Area: _____ Region: _____ Date: _____

Prepared By: _____ Daytime Phone: (_____) _____

Please check box if these forms were entered in the eAYSO by the region (ARCHIVE)

These forms are for Membership Year: _____
(2005-2006, 2006-2007, etc.)

Please ✓ only one box. A separate **REGISTRATION CONTROL SHEET** is needed for each category of registration forms you are submitting:

Returning players

New players

Instructions:

1. Total number of forms being submitted with this control sheet: _____
2. Region's playing season(s) (dates): _____
3. Attach this control sheet to the player registration forms with a paper clip, rubber band or other such device. **PLEASE DO NOT STAPLE.**
4. Include a regional check for the National Player Registration Fee due. **Registration forms will not be processed without payment.** (Personal checks are not acceptable.)
5. Use a sturdy envelope or box for mailing.

Enclosed is our check # _____ for _____ x \$ _____ = \$ _____
(players) (fee)

MAIL TO:

AMERICAN YOUTH SOCCER ORGANIZATION
Registration Department
12501 S. Isis Avenue
Hawthorne, California 90250



REGISTRATION CONTROL SHEET VOLUNTEER APPLICATIONS

Section: _____ Area: _____ Region: _____ Date: _____

Prepared By: _____ Volunteer Position: _____

Daytime Phone: (_____) _____ e-mail address: _____

Return Address: _____

City _____ State _____ Zip _____

Please check box if these forms were entered in the eAYSO by the region (ARCHIVE)

These forms are for Membership Year: _____
(2005-2006, 2006-2007, etc.)

Please ✓ only **One** box.. A separate **CONTROL SHEET** is needed for each category of volunteer application forms you are submitting:

- Returning volunteers
- New volunteers
- Board members (must be submitted with Information Form)
- Flagged (checked 'yes' or requested by CVPA/RC)

Instructions:

1. Total number of forms submitted with this control sheet: _____
2. **Region's playing season(s) (dates):** _____.
3. Attach this control sheet to the volunteer applications with a paper clip, rubber band or other such device. **PLEASE DO NOT STAPLE.**
4. **Properly screen** application forms for completeness, before mailing to the NSTC. **INCOMPLETE FORMS WILL BE MAILED BACK TO THE REGION.**
5. Use a sturdy envelope or box for mailing.

MAIL TO:

AMERICAN YOUTH SOCCER ORGANIZATION
Safe Haven Support Coordinator
Safe Haven Department
12501 S. Isis Avenue
Hawthorne, CA 90250



NOTE: CREDIT CAN NOT BE GRANTED FOR PAST MEMBERSHIP YEARS. TO RECEIVE CREDIT FOR THE CURRENT MEMBERSHIP YEAR, THIS FORM MUST BE COMPLETED AND SUBMITTED BEFORE JUNE 30

NATIONAL FEE CREDIT REQUEST

Date: _____

Section: _____ Area: _____ **Region:** _____ **Membership Year:** _____

Prepared By: _____ **Daytime Phone:** (_____) _____

The players listed below have not practiced or played in a game during the membership year indicated above. Please credit the National fee.

PLEASE PRINT or TYPE

	AYSO I.D. # (Mandatory)	FIRST and LAST NAME		AYSO I.D. # (Mandatory)	FIRST and LAST NAME
1			11		
2			12		
3			13		
4			14		
5			15		
6			16		
7			17		
8			18		
9			19		
10			20		

Regional Commissioner _____ **Date** _____
 Print Name Signature

MAIL TO:
AMERICAN YOUTH SOCCER ORGANIZATION
 Registration Department
 12501 S. Isis Avenue
 Hawthorne, California 90250



REGISTRATION RECONCILIATION FORM

Registration Date	Region/Area/ Section	Registration Location
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Checks		Total	Reg Fees	Sponsors	Equip	Other
Total Number of Checks	<input style="width: 100%;" type="text"/>	Value of Checks	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
		(a)				

Cash Receipts		Total	Reg Fees	Sponsors	Equip	Other
Total number of cash receipts	<input style="width: 100%;" type="text"/>	Value of cash receipts from receipt book	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
		(b)				
		Beginning cash balance	<input style="width: 100%;" type="text"/>			
		(c)				

Total	Reg Fees	Sponsors	Equip	Other
Deposit	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
(a) + (b) + (c)				

Charges		Total	Reg Fees	Sponsors	Equip	Other
Total Number of Charges	<input style="width: 100%;" type="text"/>	Value of Charges	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

Total player registration forms	<input style="width: 100%;" type="text"/>
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<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>
Print Name	Signature of treasurer or designee	Date
<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>
Print Name	Signature of registrar or designee	Date
<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>	<input style="width: 100%; height: 100%;" type="text"/>
Print Name	Signature of regional commissioner	Date

REGISTRATION PAYMENTS TO NSTC	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	Date	Payment	Num of Players
	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
	Date	Payment	Num of Players
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
Date	Payment	Num of Players	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	
Date	Payment	Num of Players	