

**Ohio North Youth Soccer Association**

6650 West Snowville Road Suite Y Brecksville, OH 44141

Tel: 440-526-9020 Fax: 440-526-9055

[www.ohionorthsoccer.org](http://www.ohionorthsoccer.org)

**Ohio North Affiliate Membership Form - \$75**

Fill out and return this form to Ohio North when your Club or League has had updates to your board and/or staff.

**League Name:** \_\_\_\_\_

**League Address:** \_\_\_\_\_

**Zip:** \_\_\_\_\_ **Tel:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Website:** \_\_\_\_\_

**League President:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Daytime Tel:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Vice President:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**2<sup>nd</sup> Vice President:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Treasurer:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Secretary:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Registrar:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Risk Management Contact:** \_\_\_\_\_ **Email:** \_\_\_\_\_  
(if different from President)

**Constitution/Bylaws Attached:** \_\_\_\_\_ **Goal Safety Policy Attached:** \_\_\_\_\_  
(if updated)

**Invoices should be sent to:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**E-mail:** \_\_\_\_\_

If more space is needed for additional board and staff members, please submit an additional document to accompany this one with their title, name and email address.