



ASA MEMBERSHIP APPLICATION

APPLICANT INFORMATION

Club Name:		
Website:	EIN:	Phone:
Business Address:		
City:	State:	ZIP Code:
☐ ☐ New Club ☐ ☐		
Types of Teams: ☐ Competitive ☐ Recreational ☐ Developmental ☐ Top Soccer		
501c3 Status: ☐ Approved ☐ Applied ☐ Not Yet Applied 501c3# _____		

DOCUMENT & FORM CHECK LIST

The following forms and or documents to be submitted with this Application:

☐ Club/Organization Bylaws	☐ Letters of Incorporation	☐ Arizona Corporation Commission Annual Report if applicable
☐ 501c(3) Status or other non-profit entity Submission	☐ Definition of membership Voting rights	☐ Membership Meeting Frequency Schedule Including AGM Date
☐ Roberts Rules or Meeting Format ☐ Board of Directors Meeting Frequency		

CLUB DIRECTORS AND STAFF

President	Name:	Phone:	Email:
Duties & Description:			
Previous Club Affiliation:		Position: ☐ President ☐ VP ☐ Treasurer ☐ Secretary ☐ Registrar ☐ DOC ☐ Coach ☐ Manager ☐ Other ☐ NA	
Vice President	Name:	Phone:	Email:
Duties & Description:			
Previous Club Affiliation:		Position: ☐ President ☐ VP ☐ Treasurer ☐ Secretary ☐ Registrar ☐ DOC ☐ Coach ☐ Manager ☐ Other ☐ NA	
Secretary	Name:	Phone:	Email:
Duties & Description:			
Previous Club Affiliation:		Position: ☐ President ☐ VP ☐ Treasurer ☐ Secretary ☐ Registrar ☐ DOC ☐ Coach ☐ Manager ☐ Other ☐ NA	
Treasurer	Name:	Phone:	Email:
Duties & Description:			
Previous Club Affiliation:		Position: ☐ President ☐ VP ☐ Treasurer ☐ Secretary ☐ Registrar ☐ DOC ☐ Coach ☐ Manager ☐ Other ☐ NA	
Registrar	Name:	Phone:	Email:
Duties & Description:			
Previous Club Affiliation:		Position: ☐ President ☐ VP ☐ Treasurer ☐ Secretary ☐ Registrar ☐ DOC ☐ Coach ☐ Manager ☐ Other ☐ NA	
DOC	Name:	Phone:	Email:



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Previous Club Affiliation:

Position: ☐ President ☐ VP ☐ Treasurer ☐ Secretary
☐ Registrar ☐ DOC ☐ Coach ☐ Manager ☐ Other ☐ NA

REQUEST FOR NEW CLUB MEMBERSHIP

NEW MEMBERSHIP ONLY: Please submit answers to the following questions

Describe justification for **New Club** or the void new club fills:

Statement of anticipated programs including approximate number of teams/age groups and players:



Completed application together with other required attachments should be emailed to newclub@azyouthsoccer.org

Application and attachments must be received and approved by ASA before registration will be permitted.

Applicants may be requested to attend an ASA Committee Interview before the club is approved.

Newly approved clubs are on a two-year probationary status and will be evaluated after two seasons for permanent acceptance into ASA.

New clubs must abide by all ASA rules and regulations.

Not all applicants are accepted to ASA. The ASA Board reserves the right to investigate and approve new club applications in accordance with the best interests of the ASA membership.

Signatures of Applicant Club President and one officer:

President Print Name

President Signature

Date

Officer Print Name

Officer Signature

Date