716 8th Ave N.
Myrtle Beach, SC 29577
Phone: (843) 429-0006
Fax: (843) 626-4681
Email: admin@usclubsoccer.org

RISK ASSESSMENT FORM
(CLUB EMPLOYEE/VOLUNTEER DISCLOSURE STATEMENT)

Pursuant to US Club Soccer Policies 103 and 104, every club employee or volunteer who is required to register with US Club Soccer shall complete this disclosure statement at the time of registration. Also note Policy Attachment A: US Club Soccer Risk Management Policy.

Club Name: Current Position(s): Choose one from drop down

Current Age Group(s) Involved With:
Choose one from drop down Choose one from drop down

First Name: Middle Initial: Last Name:

Social Security Number: Date of Birth:

Street Address: City: State: Zip Code:

Home Phone: Work Phone:

Email address:

Driver's License Number: State: Expiration Date:

1. Background in Youth Sports:

Position(s)	Date(s)

2. Previous Residence(s) for the last 5 years:

Street Address	City	State

3. Have you ever been convicted of a crime? If yes, please explain:

4. Have you ever been denied employment or an opportunity to participate as a volunteer with a youth sports organization pursuant to their background investigations or risk management policies? If yes, please explain:

By signing this application, I hereby verify that the information provided is true and correct.

Signature Printed Name Date