

# Cosmopolitan Junior Soccer League, Inc.



## CLUB MEMBERSHIP APPLICATION

Name of applicant organization: \_\_\_\_\_

Did you previously operate under a different name? Yes  No

If yes, please list previous name: \_\_\_\_\_

List year in which organization was first founded: \_\_\_\_\_

List previous league of affiliation: \_\_\_\_\_

List previous state association in which you were registered: \_\_\_\_\_

Does your organization have bylaws and a constitution? Yes  No

If yes, please attach a copy.

Does your organization have printed stationery? Yes  No

If yes, please attach a letterhead.

Does Your organization, under its own name, maintain an account at a banking institution? Yes  No

Name of President of Club: \_\_\_\_\_ Tel.: \_\_\_\_\_

Street address \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone or Office Phone \_\_\_\_\_ Email: \_\_\_\_\_

Does your Organization have a web site?

If yes please provide the (url.) address of site \_\_\_\_\_

Name of Secretary of Club: \_\_\_\_\_ Tel.: \_\_\_\_\_

Street address \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone or Office Phone \_\_\_\_\_ Email: \_\_\_\_\_

Name of Manager of Club: \_\_\_\_\_ Tel.: \_\_\_\_\_

Street address \_\_\_\_\_, City \_\_\_\_\_, State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone or Office Phone \_\_\_\_\_ Email: \_\_\_\_\_

Are you strictly a soccer organization? Yes  No

Do you promote other sports?

If yes, please list: \_\_\_\_\_

Are You sponsored by a parent organization? Yes  No

If yes, please state name and address: \_\_\_\_\_

What is the purpose of your parent organization? Religious  Cultural  Fraternal

Political  Social  Educational

Where are your headquarters? Address: \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_ Tel: \_\_\_\_\_

Do you own your playing field?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you rent or lease your playing field?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you play in a public/municipal park?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you play in an industrial park?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Do you play on a school/college field?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

Address of field: \_\_\_\_\_

Location of dressing room: \_\_\_\_\_

Membership meetings are held on \_\_\_\_\_ day of the month at the following location: \_\_\_\_\_  
\_\_\_\_\_

How many dues paying members does your organization have? \_\_\_\_\_

How many registered players does your organization have? \_\_\_\_\_

How many youth teams do you intend to field? \_\_\_\_\_

Do you have any other teams playing in another official soccer organization? Yes  No

If you are currently registered with another league/association, do you know that you must have a release before being accepted into membership of the C.J.S.L. ? Yes  No

Where do you get your youth Players from? \_\_\_\_\_  
\_\_\_\_\_

Have any of these players been registered during the last season for a club of the Cosmopolitan Junior Soccer League? Yes  No

State briefly why you wish to become a member of the Cosmopolitan Junior Soccer League \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Kindly submit your completed application, along with a \$100.00 non-refundable processing fee, to the Secretary:

**Emil Cohill**  
**50-23 59th Place**  
**Woodside, NY 11377**

Date: \_\_\_\_\_

Signed by: \_\_\_\_\_

Title: \_\_\_\_\_