DISTRICT 7 Pre-F COURSE APPLICATION

PLEASE PRINT

TO: DISTRICT RECREATION ADMINISTRATOR DATE: _____

THE_____YOUTH SOCCER LEAGUE

OF DISTRICT_____7____ AND LEAGUE #_____ WOULD LIKE TO SCHEDULE:

☐ "Pre F" COACHING COURSE - $150 MINIMUM FEE (+ $5 PER COACH OVER 25)

THESE MINIMUM FEES ARE NON-REFUNDABLE

DATE: (1ST CHOICE) _____ DATE: (2ND CHOICE) _____
TIME: _____

LOCATION OF COURSE (include name and address of location):

_____

NAME OF LEAGUE CONTACT: _____

ADDRESS:_____CITY: _____ ZIP: _____

PHONE: ( ) _____ EMAIL: _____

LEAGUE PRESIDENT: _____ PHONE: ( ) _____

THE FEE AND APPLICATION **MUST** BE SUBMITTED TO YOUR DISTRICT ADMINISTRATOR AT LEAST 30 WORKING DAYS PRIOR TO THE COURSE DATE.

EACH COURSE **MUST** HAVE ITS OWN APPLICATION FORM COMPLETED AND A SEPARATE LEAGUE CHECK ATTACHED.

THERE **MUST** BE A REPRESENTATIVE FROM THE HOST LEAGUE IN ATTENDANCE AT ALL TIMES.

INSTRUCTOR DESIRED (IF AVAILABLE) _____

FOR DISTRICT USE ONLY

VERIFIED – DISTRICT

_____ $_____ _____ _____
CHECK NUMBER AMOUNT DATE RECEIVED INITIAL

COURSE CONFIRMED ☐

ALTERNATE DATE ☐

COURSE NUMBER _____

TENTATIVE INSTRUCTOR

_____