



# NECYFL



## NorthEast Conference Youth Football League

Association Name: \_\_\_\_\_

**2019**

Coach/Volunteer

  

**Football**

**Cheering**

Level/Team : \_\_\_\_\_

Name: \_\_\_\_\_

First

M

Last

Address: \_\_\_\_\_ City: \_\_\_\_\_

Birth Date: \_\_\_\_\_ SS#: (last 6 digits) \_\_\_\_\_

Phone: \_\_\_\_\_ Cell #: \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_ Email: \_\_\_\_\_

*I understand that I will be obligated to pass a CORI request made by my association in order to coach or volunteer. I grant permission to do a CORI.*

I approve \_\_\_\_\_ I do not approve \_\_\_\_\_ Signed \_\_\_\_\_

### Emergency Contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Required Paperwork

CORI / SORI

Provide Picture

Place Here