

Vermont Soccer Association
Club Affiliation Application

Club Name_____

Town in which home field will be located_____

Is there an existing Club in your town already? Yes_____ No_____

Existing Club is:

Recreational Only_____Competitive/Travel_____Premiere_____ALL_____

If there is an existing Club in your town, why do you feel the need for a new club?

If there is not an existing Club in your town, explain in a few words who and what you are:

Season in which Club will operate:

Fall Only_____Spring Only_____Year-round_____

Type of Player your Club will be serving:

Recreational_____Competitive_____Premier_____

Club will be:

Boys_____Girls_____Co-ed_____Ages_____

Club size will be:

3 Teams_____4-9 Teams_____10-15 Teams_____15+ Teams_____

Please attach a copy of your bylaws and club officers.

Submitted by:_____

Date:_____

