



CONTROL SHEET
VOLUNTEER APPLICATIONS

Section: _____ Area: _____ Region: _____ Date: _____

Prepared By: _____ Volunteer Position: _____

Daytime Phone: (____) _____ Email address: _____

Return Address: _____

City _____ State _____ Zip _____

Please check box if these forms were entered in the eAYSO by the Region (ARCHIVE)

These forms are for Membership Year: _____
(Sample 2010-2011, 2011 -2012 etc.)

Region's playing season(s) (dates): _____

Total number of forms submitted with this control sheet: _____

Please ✓ only **One** box. Use a separate **CONTROL SHEET** for each category of volunteer application forms you are submitting:

- New volunteers
- Returning Volunteers
- Flagged (checked 'yes' or requested by CVPA / RC)

Instructions:

1. Attach this control sheet to the volunteer applications with a paper clip, rubber band, etc.
2. Keep a copy of this Control Sheet and attach the confirmation receipt email from Safe Haven.
3. **Properly screen** application forms for completeness before mailing to the National Safe Haven Office. Incomplete forms will be returned to the Region.
4. Use a sturdy envelope or box for mailing with USPS Certified Return Receipt or a delivery service with a package tracking number. MAIL or SHIP TO:

AMERICAN YOUTH SOCCER ORGANIZATION

National Safe Haven Office
19750 S. Vermont Ave. Suite 200
Torrance, CA 90502