



# **CALIFORNIA STARS SOCCER CLUB**

5699 Kanan Rd. # 331 Agoura Hills, CA 91301 Tel (818) 635-9521

[www.californiastars.org](http://www.californiastars.org) e-mail: [info@californiastars.org](mailto:info@californiastars.org)

---

## **AFFILIATE TEAM MEMBERSHIP REQUEST FORM**

Welcome to California Stars Soccer Club/League. The mission of California Stars Soccer Club is to provide year round club competition for youth soccer players, in a positive learning environment.

The official name of this organization is California Stars Soccer Club. The Club is a CYSA-South League of registration district 4 and is a non-profit corporation with 501(c) (3) status. Cal Stars teams compete in the Coast Soccer League, State and National Cup, CYSA-S sanctioned tournaments and US Club Soccer.

Info for existing club teams leaving their current Club to join California Stars Soccer Club/League: **a.** If 7 or more returning players (6 for U9-U10) stay with the Club, the Club will keep the bracketing status, the 4-digit team number, and the Bond. The team leaving will apply as a new team, with a new team number, and a new Bond. **b.** If less than 7 players stay with the Club (6 for U9-U10), and 7 or more move to a 'new' Club, the team moving will retain the bracketing status, the 4-digit team number, and work out of the Bond with the original Club.

### **Team Membership Cost breakdown and Due Date:**

Coast Soccer League Team fee \$425; a bond fee \$150 (bond fee is required for new teams); due on or before May 10, 2012

California Stars Soccer Club individual player club membership fee \$90.00 per player per year; due at player registration.

\*Teams are responsible for its own operational costs.

*\* California Stars Soccer Club can provide, for an additional cost, added assistance such as Professional Coaching, Team Clinics, Individual and Group Player Training, (technical, conditioning and goalkeeping) Coaching Clinics for assisting coaches with tactical, technical and physical aspects of the game. Any team in need of any of these added services should contact club personnel for information and scheduling.*

### **Team Coach/Administrator**

Team Name \_\_\_\_\_ Boys / Girls U \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

E-mail \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### **California Stars Soccer Club**

Zoran Lomic \_\_\_\_\_ Date \_\_\_\_\_

President