



APPLICATION FOR AFFILIATION

This Application for Affiliation and all supporting documentation must be submitted to the LSA Office. The process of applying for affiliation with Louisiana Soccer Association is set forth in LSA Policy 202 as shown on the LSA website *PlayLouisianaSoccer.org*.

Name of Organization:			
Type o		Non-profit Corporation (501 (c)3)	
		Website:	
		Title:	
Memb	ership desired: O Full Affiliation O Qualified	Outreach Program (see: QOP Addendum) Associate Affiliation	
The fol	Application Fee in the amount of \$75.00 and made payable to <i>Louisiana Soccer Association</i> . Proof your organization is duly registered with Louisiana, a statement reflecting that status on	of membership. Check those included with this application: First Year Affiliation Fee in the amount of \$50.00. Checks are to be the State of Louisiana. If your organization is a governmental body in the organization letterhead shall suffice. as a governing body such as a Board of Directors. The Governing Body	
0	must agree to uphold the LSA Policies and Bylav A copy of the Organization's Constitution or By Guidelines indicating affiliation with LSA is with A List of all of the Directors and Officers of the o	vslaws. If your organization is a governmental body, adopted and printed in the authority of the organization will suffice. organization together with contact information for each.	
	complex. Copies of any and all agreements with the ocurrent seasonal year and general description of Proof of Contact with the State Referee Commumbers sufficient to serve your teams. The Preferee clinics in your area. Visit PlayLouisianaSe Proof of Contact with Louisiana Soccer Assocyour area. kay@lsa-soccer.org (225) 766-0577 Proof of contact with the LSA Registrar.	nittee Chairman indicating that your organization has soccer referees in roof of Contact must also indicate that the Organization intends to hold occer.org for contact information. iation's indicating your organization's intent to hold coaching clinics in Ext 102 and of the organization as that need relates to the existence of	
State On beh and all payme	ment of Acceptance half of the above-named Organization, I hereby agonomic of its members agree to abide all of the Bylaws, and of all fees. I further certify that I have been duly	oply for membership with Louisiana Soccer Association. The organization Policies, and procedures of LSA, including registration of all players and y authorized to make this application on behalf of the Organization. Date:	
Signature of Principal Officer Date:			

Mail or Deliver this Application and all fees, attachments and supporting documentation to: Louisiana Soccer Association, ATTN: Kay Briggs, 475 Gardere Lane, Baton Rouge, LA 70820