SIMCOE COUNTY YOUTH SOCCER LEAGUE

INC. 1393701

Request for Decision (R.F.D.)

OCT 2007

R.F.D. # (filled in by the League Administrator)	**2007- R017**
Revision Date:	**NOVEMBER 25, 2007**
Area:	**RULES & REGULATIONS**
Bylaw or Rule:	**RULE 3** Section: **3.6**
Subject Title:	**CLUB OBLIGATIONS**
Submitted by (name of person or Club authoring RFD form)	**DONNA**
Club or Exec. Member Submitting RFD:	**SCYSL ADMINISTRATOR**

Present Situation:

3.6 Clubs are to send to the Administrator a team roster list, a list of available coaches, phone numbers & team colours to the League by the date set at the General meeting in April. Clubs that are on ITSoccernet will send ONE copy of each team roster printed off the ITSoccernet. Clubs that require the District to register their players must sent one copy of team roster along with the individual player registration form.

Teams Roster will list: Players names, birth dates, phone #, OSA ID#
Age group, gender, division & team colors
Coaches/assistants name, addresses, phone numbers, email address, birth date, OSA ID#, coaching Certificate #

Any individual player registration forms which are missing, but are listed on the form will be taken off the form and considered a late player. The whole team will not be registered if it is then under the minimum number of players. Player's names must be on the team forms to which they are registered.

Specific Decision Requested

3.6 Clubs are to send to the Administrator a team roster list printed off the OSA's computerized registration system to the League by the date set at the General meeting in April. The whole team will not be registered if it is then under the minimum number of players. Players/Team Officials names must be on the team forms to which they are registered. All team officials must be registered with OSA to be eligible to coach a team or serve as a team official at a game.

Team Roster will list – Players names, birth dates, phone #, OSA ID #
Age group, gender, division & team colours
Team Officials names, phone #, email address, OSA ID#, coaching certification level and/or NCCP#

Budget Requirements (Change if any): This year:	0.00		
Availability of Funds if not included in this year's budget:	none		
Advantages			
Possible Objections			
Alternatives			
Attachments			
Decision	**APPROVED**	**Dated**	**OCTOBER 21, 2007**
Amended Decision			