

# CYC District Personnel Form

District: \_\_\_\_\_

Sport Meeting Night: \_\_\_\_\_  
Location of Meeting: \_\_\_\_\_

Start Time for Meeting: \_\_\_\_\_

<b>District Chairperson:</b>	
Address: _____	Home Number: _____
City: _____	Work Number: _____
State: _____	Cell Number: _____
Zip: _____	Fax Number: _____
Home Email Address: _____	Spouse's First Name: _____
Work Email Address: _____	
<i>Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N</i>	

<b>District Vice-Chairperson:</b>	
Address: _____	Home Number: _____
City: _____	Work Number: _____
State: _____	Cell Number: _____
Zip: _____	Fax Number: _____
Home Email Address: _____	Spouse's First Name: _____
Work Email Address: _____	
<i>Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N</i>	

<b>District Vice-Chairperson:</b>	
Address: _____	Home Number: _____
City: _____	Work Number: _____
State: _____	Cell Number: _____
Zip: _____	Fax Number: _____
Home Email Address: _____	Spouse's First Name: _____
Work Email Address: _____	
<i>Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N</i>	

<b>Secretary:</b>	
Address: _____	Home Number: _____
City: _____	Work Number: _____
State: _____	Cell Number: _____
Zip: _____	Fax Number: _____
Home Email Address: _____	Spouse's First Name: _____
Work Email Address: _____	
<i>Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N</i>	

<b>Treasurer:</b>	
Address: _____	Home Number: _____
City: _____	Work Number: _____
State: _____	Cell Number: _____
Zip: _____	Fax Number: _____
Home Email Address: _____	Spouse's First Name: _____
Work Email Address: _____	
<i>Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N</i>	

# CYC District Personnel Form

**District:** \_\_\_\_\_

**Sport:** \_\_\_\_\_

**Sport Meeting Night:** \_\_\_\_\_

**Start Time for**

**Location of Meeting:** \_\_\_\_\_

**Meeting:** \_\_\_\_\_

**Sport Chairperson:**

Address: \_\_\_\_\_

Home Number: \_\_\_\_\_

City: \_\_\_\_\_

Work Number: \_\_\_\_\_

State: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Zip: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Spouse's First Name: \_\_\_\_\_

Work Email Address: \_\_\_\_\_

*Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N*

**Sport Vice-Chairperson:**

Address: \_\_\_\_\_

Home Number: \_\_\_\_\_

City: \_\_\_\_\_

Work Number: \_\_\_\_\_

State: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Zip: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Spouse's First Name: \_\_\_\_\_

Work Email Address: \_\_\_\_\_

*Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N*

**Head Official:**

Address: \_\_\_\_\_

Home Number: \_\_\_\_\_

City: \_\_\_\_\_

Work Number: \_\_\_\_\_

State: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Zip: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Spouse's First Name: \_\_\_\_\_

Work Email Address: \_\_\_\_\_

*Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N*

**Secretary:**

Address: \_\_\_\_\_

Home Number: \_\_\_\_\_

City: \_\_\_\_\_

Work Number: \_\_\_\_\_

State: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Zip: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Spouse's First Name: \_\_\_\_\_

Work Email Address: \_\_\_\_\_

*Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N*

**Treasurer:**

Address: \_\_\_\_\_

Home Number: \_\_\_\_\_

City: \_\_\_\_\_

Work Number: \_\_\_\_\_

State: \_\_\_\_\_

Cell Number: \_\_\_\_\_

Zip: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Home Email Address: \_\_\_\_\_

Spouse's First Name: \_\_\_\_\_

Work Email Address: \_\_\_\_\_

*Completed MO. State Child Abuse Y - N, Protecting God's Children Y - N, Code of Conduct Y - N*