



Fall/Spring 2017/18 Athens United Soccer Association Academy/Select Coaching Application

Name: _____

Address: _____

STREET

CITY

ZIP

Phone: (H) _____ (M) _____

Email: _____ DOB: _____

Current Team Coaching: _____ Current Age Group: _____

Age Group Desired (Please mark your top 3 choices in preference order)

U10 ___ Boys ___ Girls Academy

U15 ___ Boys ___ Girls Select

U11 ___ Boys ___ Girls Academy

U16 ___ Boys ___ Girls Select

U12 ___ Boys ___ Girls Academy

U17 ___ Boys ___ Girls Select

U13 ___ Boys ___ Girls Select

U19 ___ Boys ___ Girls Select

U14 ___ Boys ___ Girls Select

Playing Experience: (Please list name of School/Club and Number of Years)

Youth _____ #Years _____

High School _____ #Years _____

College _____ #Years _____

Amateur/Professional _____ #Years _____

Coaching Experience: (Please list Club/School and Number of Years)

Recreational _____ #Years _____

Academy/Select _____ #Years _____

High School/College _____ #Years _____

Coaching License:

USSF _____

NSCAA _____

Other _____



Athens United Soccer Coaching Information

Name: _____

Address _____

City _____ Zip _____

Home Phone _____

Cell Phone _____

Email _____

Age Group Request _____

License Level _____

SSN # _____

Driver's License # _____ State _____

*Please return application via email to lloydausa@yahoo.com, via fax to 706-353-2557, or you can mail or drop the application at the office: 2350 Prince Ave., Suite 1, Athens, 30606.



COACHING FEES

USSF NATIONAL D	\$500.00 PER TEAM PER MONTH
USSF NATIONAL C	\$650.00 PER TEAM PER MONTH
USSF NATIONAL B	\$750.00 PER TEAM PER MONTH
USSF NATIONAL A	\$850.00 PER TEAM PER MONTH

OR EQUIVALENT LICENSE FROM FIFA

**All Academy/Select coaches are required to possess a minimal USSF D license*

**ALL LICENSES MUST BE PRODUCED FOR
EMPLOYMENT WITH ATHENS UNITED**