



# California Youth Soccer Association, Inc. Duplicate Coaching License Request Form



The cost of a duplicate license is **\$10.00**. Make checks payable to **CYSA** or fill in credit card below. Please fill in your current information as **completely** as possible to verify your license and **update our records**. Licenses will only be mailed. Please request your license as soon as you notice it is missing to allow adequate time for turn around. For verbal verification of a coaching license, your District Coaching Coordinator may be contacted for assistance.

**Please print or type request.**

\* = Required to process request

\* License Level (Please select): GK  F  E  E/D  State D/National D

\* Your Name: \_\_\_\_\_

\* Current Mailing Address: \_\_\_\_\_

\* City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\* Previous Name or Address at time of course: \_\_\_\_\_

\* Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

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

If the license is not on file, please provide as much of the information below so it can be researched.

Date course was taken: \_\_\_\_\_

City and site where taken: \_\_\_\_\_

Instructor or Course Contact: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp: \_\_\_\_\_  
Visa or Master Card Only – No Debit Cards

Cardholder's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Mail request to:**

California Youth Soccer Association (CYSA)  
1040 Serpentine Lane Suite 201  
Pleasanton, CA 94566-4754

**Or Fax:**

925.426.9473