

CYSA Board Nomination/Application Form

Name:			
I am willing to sub	mit a background check	_ I have a background check completed for CYS	A, year
Experience in leader	ship positions		
Why I would like to b	oe on the board of director	rs for CYSA	
Have you been invol If so please list:	ved in any soccer organiza	rations within the State of Washington?	1
Signed		Date	
or to CYSA, Attn: Nomi	nating Committee, PO Box 23	rt5@q.com AND trieste.graphics@gmail.co 345, Longview, WA 98632. This form must to be eligible for consideration.	
1217 3rd Ave Suite 150		dnesday November 1st, 2023 at Smythe Breere voting will take place by ballot only.	ewing Co.,
CYSA NOTES - Official U	Date Date to	A convey and b	