



ODP Staff Profile

2011 - 2012

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____

Social Security Number: _____ - _____ - _____ Date of Birth: _____

Coaching Licenses Held

- | | |
|---|--|
| <input type="checkbox"/> USSF 'A' License | <input type="checkbox"/> NSCAA Premier Diploma |
| <input type="checkbox"/> USSF 'B' License | <input type="checkbox"/> NSCAA Advanced National Diploma |
| <input type="checkbox"/> USSF 'C' License | <input type="checkbox"/> NSCAA National Diploma |
| <input type="checkbox"/> USSF 'D' License (National) | <input type="checkbox"/> NSCAA Advanced Regional Diploma |
| <input type="checkbox"/> USSF 'D' License (State) | <input type="checkbox"/> NSCAA Regional Diploma |
| <input type="checkbox"/> USSF 'E' License | |
|
 | |
| <input type="checkbox"/> USSF Youth National License | <input type="checkbox"/> NSCAA Advanced Youth Diploma |
|
 | |
| <input type="checkbox"/> USSF National Goalkeeping License | <input type="checkbox"/> NSCAA Advanced National GK Diploma |
| | <input type="checkbox"/> NSCAA National GK Diploma (level 3) |
| | <input type="checkbox"/> NSCAA Regional GK Diploma (level2) |
|
 | |
| <input type="checkbox"/> Other licenses not above (foreign licenses, etc.– Please list; _____ | |

Current Coaching Responsibilities (List all affiliations, i.e. if you coach at the university and club level)

College / University _____

Gender _____

Head or Assistant? _____

Club _____

High School _____

Age Group & Gender _____

Gender _____

Head or Assistant? _____

Head or Assistant? _____

Select the positions for which you wish to be considered

- | | |
|--|---|
| <input type="checkbox"/> State Coaching Staff | <input type="checkbox"/> District Coaching Staff |
| <input type="checkbox"/> State Goal Keeping Staff | <input type="checkbox"/> District Goal Keeping Staff |
| <input type="checkbox"/> State Evaluation Staff | <input type="checkbox"/> District Evaluation Staff |

Please check the District(s) and Session times for which you are available;

Date	Session	District		Time	Age Groups	Location
November 5, 2011	1	District 1		10:00am - 11:45am	2001 & 2000	Lebanon Sports Complex
	1	District 1		12:00pm - 1:45pm	1999 & 1998	Lebanon Sports Complex
	1	District 1		2:00pm - 3:45pm	1997 & 1996	Lebanon Sports Complex
November 5, 2011	1	District 2		10:00am - 11:45am	2001 & 2000	Hobson Freedom Park
	1	District 2		12:00pm - 1:45pm	1999 & 1998	Hobson Freedom Park
	1	District 2		2:00pm - 3:45pm	1997 & 1996	Hobson Freedom Park
November 5, 2011	1	District 3		10:00am - 11:45am	2001 & 2000	Spindler Park
	1	District 3		12:00pm - 1:45pm	1999 & 1998	Spindler Park
	1	District 3		2:00pm - 3:45pm	1997 & 1996	Spindler Park
Date	Session	District		Time	Age Groups	Location
November 6, 2011	2	District 1		10:00am - 11:45am	2001 & 2000	Lebanon Sports Complex
	2	District 1		12:00pm - 1:45pm	1999 & 1998	Lebanon Sports Complex
	2	District 1		2:00pm - 3:45pm	1997 & 1996	Lebanon Sports Complex
November 6, 2011	2	District 2		10:00am - 11:45am	2001 & 2000	Hobson Freedom Park
	2	District 2		12:00pm - 1:45pm	1999 & 1998	Hobson Freedom Park
	2	District 2		2:00pm - 3:45pm	1997 & 1996	Hobson Freedom Park
November 6, 2011	2	District 3		10:00am - 11:45am	2001 & 2000	Spindler Park
	2	District 3		12:00pm - 1:45pm	1999 & 1998	Spindler Park
	2	District 3		2:00pm - 3:45pm	1997 & 1996	Spindler Park
Date	Session	District		Time	Age Groups	Location
November 12, 2011	3	District 1		10:00am - 11:45am	2001 & 2000	Lebanon Sports Complex
	3	District 1		12:00pm - 1:45pm	1999 & 1998	Lebanon Sports Complex
	3	District 1		2:00pm - 3:45pm	1997 & 1996	Lebanon Sports Complex
November 12, 2011	3	District 2		10:00am - 11:45am	2001 & 2000	Hobson Freedom Park
	3	District 2		12:00pm - 1:45pm	1999 & 1998	Hobson Freedom Park
	3	District 2		2:00pm - 3:45pm	1997 & 1996	Hobson Freedom Park
November 12, 2011	3	District 3		10:00am - 11:45am	2001 & 2000	Spindler Park
	3	District 3		12:00pm - 1:45pm	1999 & 1998	Spindler Park
	3	District 3		2:00pm - 3:45pm	1997 & 1996	Spindler Park

Date	Session	District		Time	Age Groups	Location
November 13, 2011	4	District 1		10:00am - 11:45am	2001 & 2000	Lebanon Sports Complex
	4	District 1		12:00pm - 1:45pm	1999 & 1998	Lebanon Sports Complex
	4	District 1		2:00pm - 3:45pm	1997 & 1996	Lebanon Sports Complex
November 13, 2011	4	District 2		10:00am - 11:45am	2001 & 2000	Hobson Freedom Park
	4	District 2		12:00pm - 1:45pm	1999 & 1998	Hobson Freedom Park
	4	District 2		2:00pm - 3:45pm	1997 & 1996	Hobson Freedom Park
November 13, 2011	4	District 3		10:00am - 11:45am	2001 & 2000	Spindler Park
	4	District 3		12:00pm - 1:45pm	1999 & 1998	Spindler Park
	4	District 3		2:00pm - 3:45pm	1997 & 1996	Spindler Park
November 19 -20		Rain date 1		10:00am - 11:45am		
				12:00pm - 1:45pm		
				2:00pm - 3:45pm		
November 26 - 27		Rain date 2		10:00am - 11:45am		
				12:00pm - 1:45pm		
				2:00pm - 3:45pm		

Winter Sessions

Date	Session	District		Time	Age Groups	Location
December 3, 2011	5	District 1		8:00am - 9:45am	2000	Superkick
	5	District 1		10:00am - 11:45am	1999	Superkick
	5	District 1		12:00pm - 1:45pm	1998	Superkick
	5	District 1		2:00pm - 3:45pm	1997	Superkick
	5	District 1, 2, 3		4:00pm - 5:45pm	1996 Boys	Superkick
December 4, 2011	6	District 1		8:00am - 9:30am	2000	Superkick
	6	District 1		9:30am - 11:00am	1999	Superkick
	6	District 1		11:00am - 12:30pm	1998	Superkick
	6	District 1		12:30pm - 2:00pm	1997	Superkick
	6	District 1, 2, 3		2:00pm - 3:45pm	1996 Boys	Superkick
December 10, 2011	5	District 2		8:00am - 9:45am	2000	Superkick
	5	District 2		10:00am - 11:45am	1999	Superkick
	5	District 2		12:00pm - 1:45pm	1998	Superkick
	5	District 2		2:00pm - 3:45pm	1997	Superkick
	5	District 1, 2, 3		4:00pm - 5:45pm	1996 Girls	Superkick

Date	Session	District		Time	Age Groups	Location
December 11, 2011	6	District 2		8:00am - 9:30am	2000	Superkick
	6	District 2		9:30am - 11:00am	1999	Superkick
	6	District 2		11:00am - 12:30pm	1998	Superkick
	6	District 2		12:30pm - 2:00pm	1997	Superkick
	6	District 1, 2, 3		2:00pm - 3:45pm	1996 Girls	Superkick
Date	Session	District		Time	Age Groups	Location
January 31, 2012	5	District 3		6:00pm - 7:30pm	2000	Superkick
	5			7:30pm - 9:00pm	1999	Superkick
Date	Session	District		Time	Age Groups	Location
February 7, 2012	6	District 3		6:00pm - 7:30pm	2000	Superkick
	6			7:30pm - 9:00pm	1999	Superkick
Date	Session	District		Time	Age Groups	Location
February 14, 2012	***	***		No Training	***	***
	***	***		No Training	***	***
Date	Session	District		Time	Age Groups	Location
February 21, 2012	5	District 3		6:00pm - 7:30pm	1998	Superkick
	5	District 3		7:30pm - 9:00pm	1997	Superkick
Date	Session	District		Time	Age Groups	Location
February 28, 2012	6	District 3		6:00pm - 7:30pm	1998	Superkick
	6	District 3		7:30pm - 9:00pm	1997	Superkick

Date	District	Session		Time	Age Groups	Location
March 31, 2012	Festival	7		TBA	2000 - 1996	Athletes in Action /Hobson
	District 1, 2, 3	1 & 2		TBA	1995	Athletes in Action /Hobson
	District 1, 2, 3	5		TBA	2001	Athletes in Action /Hobson
April 1, 2012	Festival	8		TBA	2000 - 1996	Athletes in Action /Hobson
	District 1, 2, 3	3		TBA	1995	Athletes in Action /Hobson
	District 1, 2, 3	6		TBA	2001	Athletes in Action /Hobson

I understand that I may not use the ODP program, uniforms or any materials provided by the ODP Program for the recruitment of players for any Youth Club or team. I may be asked to appear before the conduct committee of Ohio South and may be subject to sanctions including suspension from ODP, OSYSA, US Youth Soccer (USYS), or United States Soccer Federation (USSF).

Signed: _____

Date: _____

INDEPENDENT CONTRACTORS AGREEMENT

This Agreement is between the OHIO SOUTH YOUTH SOCCER ASSOCIATION, INC., hereinafter called
The Association and, hereinafter called the Contractor as follows:

1. Contractor agrees to perform, as an independent contractor, coaches training services as specified for the Association.
2. The Association shall pay the Contractor for the aforementioned performance in accordance with the rate(s) set forth in Schedule A as shown below.
3. Both parties agree that the Contractor named above is acting as an independent Contractor. This agreement does not create any relationship of partnership, joint venture, fiduciary agreement or employment relationship between the Association and the Contractor named above. Nothing herein shall be construed to give the Contractor a status other than that of independent contractor. Contractor is not an employee of the Association.
4. Consistent with the status as independent contractor, the Contractor agrees that the Association representative may, as required, advise the desired final result that the service is designed to achieve. Coaches' Clinics and training services will be performed to the satisfaction of the Association.
5. Contractor expressly disclaims possession of any rights in respect to the Association except those to which an independent contractor is entitled by law or agreement. Contractor affirms that all compensation paid hereunder to Contractor shall be in full without any deduction for federal or state income taxes, F.I.C.A. tax, federal or state employment or disability insurance, or similar taxes or contributions, all of which are Contractor's obligation to the extent required by any independent contractor. Contractor expressly releases the Association from any claim Contractor may have if Contractor were an employee, including without limitation any claim arising under a worker's compensation act.
6. Contractor agrees that Contractor shall be solely responsible for all loss, expense (including attorney's fees) and damage and shall indemnify the Association against and save the Association harmless from all claims, demands and judgments because of damage to property or personal injury including death, from any cause whatsoever, arising out of, incidental to or in connection with the services Contractor shall perform hereunder, whether or not caused by Contractor's negligence, provided that this indemnification and hold harmless agreement shall not apply to circumstances resulting from the sole negligence of the Association as finally determined by a court of competent jurisdiction.
7. Either party without cause, upon thirty (30) days written notice may terminate this Agreement.

Are you aware of any situations regarding your coaching in Ohio South ODP that may be construed as a conflict of interest with other club, high school, college, etc. programs?

Please circle one NO YES (if yes, explain _____)

PLEASE SIGN CONTRACTOR SECTION BELOW:

(PRINT NAME) _____

(SIGN) _____

Independent Contractor

Date Signed _____

ODP Payment Schedule (2011 – 2012)

District Head Coach	\$40.00	Per District Training Session
District Assistant	\$25.00	Per District Training Session
State Head Coach	\$850.00	9 - 11 Summer (June – July) training sessions and 5 day Regional Camp
State Assistant	\$550.00	9 - 11 Summer (June – July) training sessions and 5 day Regional Camp
State Head Coach	\$680.00	9 - 11 Summer (June – July) training sessions and 4 day Regional Camp
State Assistant	\$440.00	9 - 11 Summer (June – July) training sessions and 4 day Regional Camp

**PLEASE NOTE: DEDUCTIONS FROM THE ABOVE SCHEDULE WILL OCCUR FOR MISSED SESSIONS
State Coach Payment Schedule includes per diem for Regional camp**

Name _____

Adidas is the OFFICIAL SUPPLIER to OSYSA for the ODP and State Teams. Adidas will again be providing some apparel for our coaches this year. I will be ordering all Adidas Coaching gear on October 1. Please provide the following information to me by September 20th so I may order the appropriate items.

IF THIS FORM IS NOT RETURNED BY THE DATE ABOVE, NO APPAREL WILL BE ORDERED FOR YOU.

Shirt: XL L M S Shorts: XL L M S

Warm Up: XL L M S Shoe:

Checklist

- 1. Page 2 - 4 - District Training availability section – Did you indicate the session times you are available for?
- 2. Page 5 – Independent Contractor section - Did you sign the Independent Contractor agreement?
- 3. Fill out the Kidsafe Risk management form online using the following link;

[Kidsafe Risk Management Form](#)

If this form is a printed version or the link is unavailable, please go to www.osysa.com – Forms and resources tab – Risk Management Forms – Complete a Kidsafe Risk management Form

- 4. LAST STEP.....Fill out the W-9 on the following page. Save a copy for your records and e-mail a copy of completed form to;

Gordon Henderson
Ohio South Youth Soccer
Director of Coaching

henderson@osysa.com

or
FAX: (513) 576 - 1666

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2.	Name (as shown on your income tax return)	
	Business name/disregarded entity name, if different from above	
	Check appropriate box for federal tax classification (required): <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate	
	<input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶	
	<input type="checkbox"/> Other (see instructions) ▶	
Address (number, street, and apt. or suite no.)		Requester's name and address (optional)
City, state, and ZIP code		
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on the "Name" line to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number									

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Employer identification number									

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here	Signature of U.S. person ▶	Date ▶
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.