



# ODP Manager Application

The ODP Manager position is a leadership role. Parents and players look to Managers for accurate and timely information. They are often the first point of contact for parents at field or via electronic communication. Additionally, Managers act as a filter for repetitive programmatic questions and package and report important concerns/questions/issues to the Program Director.

ODP Managers are volunteers and are important ambassadors for Maryland State Youth Soccer Association (MSYSA). Accordingly, Managers must always act in a manner consistent with the vision, mission, and leadership of MSYSA. Please note that Managers receive a credit towards the Program fee.

Some examples of the responsibilities of a Manager:

- Answer questions from parents and report any issues/concerns to the Program Director
- Perform onsite game duties for Friendlies and East Region Tournament. This includes schedule and administrative management as well as last minute notifications
- Disseminate information to parents/coaches when appropriate

Important notes for Managers:

- ODP email lists are only to be used for approved official ODP activities
- Only MSYSA approved information may be disseminated
- The Program Director must be blind copied on every email from ODP Managers to parents/coaches
- Additional funds may only be collected if written approval is provided in advance by MSYSA

If you are interested in serving as a Manager for the 2021 ODP season, please submit this form by November 9<sup>th</sup>, 2020 to the Program Director, at [programs@msysa.org](mailto:programs@msysa.org).

Full Name: _____	Age Group & Gender: _____
Have you previously served as a team manager? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, # of years? _____	
Phone (____) ____-____	Email: _____

I have read the above information and agree to abide by the stated guidelines. I agree to act in accordance with MSYSA leadership and policy, and to never publicly act in any way that could be viewed as negative toward MSYSA. I understand that while this is a voluntary position, I can be relieved of my duties at any time and for any reason. MSYSA has the final say in any and all decisions.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_