



CLOSED OR INACTIVE REGION REPORT

When the status of a region changes, there are certain procedures that must be followed pertaining to securing assets and filing reports. The law is very specific regarding fiduciary responsibility of non-profit corporations. This report has been created to allow better follow up, help track assets and identify the region involved in the proposed or completed action. **AREA DIRECTOR AND SECTION DIRECTOR MUST SIGN THIS FORM.**

PLEASE COMPLETE THIS FORM TO REPORT A CHANGE OF STATUS.		
S/A/R / /	Today's Date:	Pilot Date:
City	State	(✓ One) <input type="checkbox"/> Region Inactive <input type="checkbox"/> Region Closed
Date of Inactivity/Closure:	Note: Please notify the Development and Finance Departments at the NSTC (800-872-2976) upon completion of this form.	

ONCE COMPLETED, PLEASE MAIL OR FAX TO: AYSO National Support & Training Center, 12501 Isis Ave, Hawthorne, CA 90250-5045, FAX (310) 643-5310.

Reason for Inactivity/Closure:	
Who informed you? Name & Position:	
Date Section Director was notified:	By Whom:
Date NSTC was notified:	Name of person notified @ NSTC:
Have bank accounts been closed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, by whom?
Was a check forwarded to NSTC? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, where was the check sent?
<i>Note: If funds were disbursed they must go to the another 501(c)(3) corporation - we must have proof on file.</i>	
Are you aware of any outstanding invoices, including the Supply Center? <input type="checkbox"/> Yes <input type="checkbox"/> No	Amount?
Have all registration fees been paid? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, how much owed? \$_____
Location of Region equipment & other assets: Attach a list of equipment/assets. List below where it is stored.	
Name:	Phone:
Address:	City/State/Zip
Recommended plans for restart of the region:	
Additional Comments:	

Area Director Signature

Date

Section Director Signature

Date

For Office Use Only:	Board of Directors Approval:	Date:
Date Account closed by NSTC:	Closed by:	

cc: Development/Finance

J:EMD forms/Closed or Inactive Report/rev 08-04