

Community Athletics of North Hunterdon Volunteer Application

A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION.

Name _____ Date _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Business Phone _____ Date of Birth _____

Social Security # _____ E-mail Address (optional) _____

Occupation _____ Employer _____

Employer Address _____

Special professional training, skills, hobbies: _____

Community affiliations (Clubs, Service Organizations, etc.): _____

Previous volunteer experience: _____

Do you have children in the program? **Yes/No** If yes, at what level? _____

Special Certification (i.e. CPR, Medical, Rutgers Sports Safety, etc.): _____

Do you have a valid driver's license: **Yes/No** Driver's License#: _____ State _____

Have you ever been convicted of or plead guilty to any crime(s): **Yes/No**

If yes, describe each in full: _____

Have you ever been refused participation in any other youth programs? **Yes/No**

If yes, explain: _____

In which of the following would you like to participate? (Circle one or more.)

League Official **Coach** **Umpire** **Manager** **Scorekeeper** **Other**

Please list three personal references:

Name Phone

Name	Phone

As a condition of volunteering, I give permission for Community Athletics of North Hunterdon to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability Community Athletics of North Hunterdon, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, Community Athletics of North Hunterdon is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the Executive Director and removal by the Board of Directors for violation of Community Athletics of North Hunterdon policies or principles.

Applicant Signature _____ Date _____

Applicant Name (please print or type) _____

NOTE: Community Athletics of North Hunterdon will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

Local League Use Only:

Background check complete by league officer _____ on _____

System(s) used for background check (minimum of one must be checked):

Sex Offender Registry _____ Criminal History Records _____

Only attach to this application copies of background check reports that reveal convictions of this applicant.