

VOLUNTEER APPLICATION

Longview Boys Baseball Association
Longview, Texas

Personal Information

Date of Completion of This Form: _____/_____/_____

Your Full Legal Name: _____

Date of Birth: _____/_____/_____

Other Names (maiden, alias, etc): _____

Male or Female: _____ Social Security Number: _____/_____/_____

Drivers License Number: _____ Drivers License State: _____ Expires: _____/_____/_____

Home Phone: (____)____-____ Work Phone: (____)____-____ Cell Phone: (____)____-____

Home Address: List all for past 7 years

Present (including dates): _____

Previous (including dates): _____

Previous (including dates): _____

Previous (including dates): _____

(attach a separate sheet if additional space is needed)

Qualifications

What position are you applying for?: _____

Have you ever been convicted of a crime? (if yes, explain) _____

Have you ever been refused participation in any other youth sports program (if yes, explain) _____

Do you have children in the program? _____

Why do you want to be a volunteer? _____

Why are you qualified to coach, manage, etc: _____

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Acknowledgement Of Training

I acknowledge that on _____ I was given a copy of the Longview Boys Baseball Association's Simplified Child Abuse/Molestation Risk Management Program and I have carefully reviewed it and voluntarily agree that as a condition of future participation, employment or involvement in this organization, I will abide by all the terms, conditions, policies and procedures contained within this program.

If I violate the policies, regulations or spirit of this program, I will indemnify and hold harmless the Longview Boys Baseball Association, its employees, board members, volunteers and officials from any and all liability including negligence and any intentional tort claims.

Signature _____ Date: ____/____/____

Consent/Release

I authorize and give consent for the Longview Boys Baseball Association to obtain my personal information.

This includes, but is not limited to employment records/employer's references; criminal background checks/fingerprints; driving record check, financial bankruptcy information, coaching experience, personal references and addresses.

I authorize this information to be obtained either in writing, via internet or via telephone in connection with my volunteer application.

I understand that my position is contingent upon adverse information about my background or character not being uncovered upon the performance of the above referenced checks. I also understand that regardless of my prior volunteer activities on behalf of the Longview Boys Baseball Association is not required to allow my continued participation.

I agree to hold harmless and indemnify from liability the Longview Boys Baseball Association and its directors, officers, employees and volunteers from all liability arising out of the use of the information that is uncovered in the above referenced checks.

Signature _____ Date: ____/____/____

For Longview Boys Baseball Association Use Only

Background checks completed by _____ on ____/____/____

Sources Checked:

_____ Clean

_____ Not Clean (keep this form and record check on file for 15 years if not clean)