



Youth Sports Volunteer Form

Year:_____ Sport:_____

CONTACT INFORMATION

Name:_____

Cell Phone #:_____

Address:_____

City:_____ State:_____ Zip:_____

Email:_____

Birth Date:_____ Are you over 18? ___ Y ___ N

Employer: _____

Employer Phone #:_____

***YOU WILL RECEIVE AN EMAIL FROM "AMERICAN CHECKED" WITH A SECURE LINK TO PROVIDE YOUR SOCIAL SECURITY NUMBER IN ORDER TO COMPLETE YOUR BACKGROUND CHECK. YOU WILL NOT BE ABLE TO VOLUNTEER UNTIL THIS HAS BEEN COMPLETED.**

VOLUNTEER POSITION

___ Head Coach ___ Asst. Coach ___ Team Parent

SPORTS VOLUNTEER EXPERIENCE

Year:_____ Detail: _____

DO YOU HAVE CHILDREN IN THE PROGRAM: ___ Y ___ N

Year:_____ Detail: _____

If "yes" name and age:_____

Year:_____ Detail: _____

RELATED SKILLS/CERTIFICATIONS/COMMUNITY ASSOCIATIONS

ADDITIONAL INFORMATION

Do you have a valid Driver's License? ___ Y ___ N

If "yes" Driver's License #:_____ State:_____

Have you been refused participation in other youth programs? ___ Y ___ N

Have you been convicted of a felony? ___ Y ___ N

Please list three references, one of which has knowledge of your participation as a volunteer in a youth program.

Name:_____

Phone #:_____

Name:_____

Phone #:_____

Name:_____

Phone #:_____

My signature is my permission for the Pelham Youth Sports Program to conduct a background check on me, which may include a review of criminal and child abuse records maintained by governmental agencies. I understand that if allowed to volunteer, my position is conditional upon the league receiving no inappropriate information on my background screening. I hereby release and agree to hold harmless from liability the local Pelham Youth Sports Program, Pelham Parks & Recreation Board, The City of Pelham, the officers, employees, and volunteers thereof, or any other person or organization that may provide such information. I also understand that, prior to the expiration of my term, I am subject to suspension by or removal from the program by the Pelham Youth Sports Program, Pelham Parks & Recreation Board, or the Parks & Recreation Director with or without cause.

Volunteer Signature:_____

Date:_____

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