

Piedmont Youth Football and Cheer League

2015 Official Volunteer Application (Complete BOTH Pages) Do NOT use forms from previous years.

PLEASE NOTE: A copy of a valid government-issued photo identification must be attached to this application.

Name: _____ Date: _____ Special professional training, skills, hobbies: _____

Prior/Maiden Names or Aliases: _____

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

Telephone: _____ Email: _____

City: _____ State: _____ Zip: _____ Previous/current volunteer experience (e.g. baseball/softball and years): _____

Mailing Address (if different): _____

Do you have children in the program? YES _____ NO _____

Previous states resided in the past 5 years: _____ If yes, at what level? _____

Date of Birth: _____ Special Certification (i.e. CPR, Medical, etc.): _____
(mm / dd / yyyy)

Social Security Number: _____ Have you ever been charged with or convicted of a felony? YES _____ NO _____

Occupation: _____ If yes, provide your current legal status (parole, etc.) _____

Employer: _____ Have you ever been convicted of **any** crime involving or against a minor? YES _____ NO _____

Address: _____ Have you ever plead guilty to, been convicted of or involved with any other type of crime? YES _____ NO _____

Do you have a valid driver's license? YES _____ NO _____ Have you ever been refused participation in any other youth programs? YES _____ NO _____

Driver's License#: _____ State: _____

If YES to ANY of the above, explain:

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

League Official: _____ Head Coach: _____ Board Member: _____ Equipment Manager: _____ Assist. Coach: _____

Team Mom: _____ Coach Trainee: _____ Trainer: _____ Student Demo: _____

Other: _____

Association Name: _____

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<u>Name:</u>	<u>Nature of Relationship:</u>	<u>Phone #:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby swear and attest that all information provided on this application is true and complete to the fullest extent of my knowledge. If I am accepted as a volunteer, PYFCL may end the relationship immediately if I have made any false statements or material misrepresentations, written or verbal. As a condition of volunteering, I hereby grant permission to PYFCL to conduct a background check on me, which may include a review of database records including but not limited to sex offender registries, child abuse and criminal history records in compliance with PYFCL's child protection policy. I understand and agree 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 the local PYFCL, the officers, employees and volunteers thereof, and/or any other person or organization that may provide such information.

I also understand that, regardless of previous appointments, Piedmont Youth Football and Cheer League is not obligated to appoint me to a volunteer position. I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for any and all violations of Piedmont Youth Football and Cheer policies or principles. Furthermore, I hereby attest that all contact information provided herein is up to date and I hereby grant Piedmont Youth Football Cheer League and its partners permission to utilize such contact information for communications and promotions during my tenure as a volunteer.

_____	_____
Applicant Signature	Date
Applicant Name (Print or Type): _____	

NOTE: Piedmont Youth and Football League will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

For Local Use Only. Below please print the **legal name** of the individual who performed the background check on the applicant and name of the local organization.

Background check completed by Association officer: _____
or _____

Background check completed by League officer: _____
or _____

completed by: _____ Date Completed: _____

System(s) used for background check (minimum of one must have "X"):

Online multistate database: _____ State/Federal Criminal History Records: _____ FEDERAL Sex Offender Registry _____ Other (please explain): _____
(Choicepoint, etc.)

LEAGUES: You must maintain copies of background check results at the league level for the duration of the volunteer's service.