LEAYSA VOLUNTEER APPLICATION APPLICATION FOR ADULT VOLUNTEER PROGRAM PARTICIPATION

(Please use ink and print all names)

PROGRAM:	Football/ Cheerleader	Basketball/ Cheerleader	Soccer	Softball Baseball	Area:
POSITION: * Position has requirements. Check w/Area President.	Head Coach * Asst Coach Equipment Stats Scoring	Team Mom Uniform Concessions Publicity Public Address	President V-Pres. Treasurer Bylaws Other: (indic	Commissioner * Vice Comm. * Committee * Photographer ate)	Officials * Fundraiser Events Secretary
Name:				Day Phone:	
Address:		-		Evening Phone:	
City:			Zip:	e-Mail:	
Drivers License DOB: Expiration:	:			Employer:	*
REFERENCES: Lis	t below references for ex	pertise and/or personal ev	aluation - do not inc	lude relatives.	
FUL	L NAME, ADDRESS AND	ASSOCIATION WITH APP	LICANT	OCCUPATION	HOW LONG KNOWN
		Zip:	Phone:		
				<u></u>	
		Zip:	Phone:		<u> </u>
HAVE YOU EVER BEEN CONVICTED OF A FELONY/CRIME (excludes minor traffic violations but includes DRIVING UNDER THE INFLUENCE OF ALCOHOL, OR DRUGS, RECKLESS DRIVING) or similar serious violations? G YES G NO If answer is YES, explain.					
g iLo g No	,				
		V Spr		(Use bad	ck of form if necessary)
APPLICATION. INC	LUDE DATES OF PARTIC		OF THE POSITION, L	IN THE POSITION FOR WH OCATION OF PERFORMANC	
				(Use bad	ck of form if necessary)
IN CASE OF EMERO	SENCY NOTIFY:	<u>.</u>		Phone:	
INSURANCE CARRI	ER:	Policy No:		Cert No. or SSN:	
Elm Athletic You information conta	th Sports Association ained in the above app	re under penalty of per and its member area plication. I understand	as authority to pe that untrue or inc	going is true and correct. rform a background che complete answers discov Association may subject	eck and to verify all vered subsequent to
Signature of Appl	icant:			DATE:	
		FOR LEAYS	A USE ONLY		
01MARCH09					