

SAY Volunteer Application

Please PRINT all inform	nation. Field	ds iden	itified wi	ith an (*) are req	uired.
Applicant Information						
*First Name: MI:			*Last Name:			
*Current Address:	1	*Years Lived		ed at Current Address:		
*City:		*State:		*ZIP Code:		
*Home Phone:	*Work Phone:			*Date of Birth:		
*Driver License #:		*State Issued:		*Expiration Date:		
Personal History Information						
The following must be complete	d by all volunt	teers, ne	w and retu	ırning.		
Have you ever been found guilty by a court or other tribunal to have committed a violent act against another person, engaged in any misconduct involving a juvenile OR been convicted of a crime except for a minor traffic violation?					□YES	□no
If YES then enter Social Security Number:						
Returning Volunteer – Check one: My personal history HAS —/HAS NOT — changed since last year.						
Notice of Consent to Criminal	Background (Check				
Soccer Association for Youth (Sconduct a criminal background	•		•			
As an applicant for a SAY volunteer made, including the information provauthorize SAY to verify the above information requested. If requested	vided in response formation and w	e to the oraive any	questions req right to conf	garding my identiality	criminal histo with respect t	ory. I
Signature of applicant					Date	
	AREA	USE ON	LY			
SAY Area:						
Must be signed if a "YES" response in P	ersonal History Ir	nformation	ı.			
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Signature of Area Volunteer Administ	rator	Date				

SAY Form VA01 (tft)

March 1, 2006