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

Full Legal Name:		Date:	Special professional training, skills, hobbies:			
Prior/Maiden Names or Alia	ses:					
Address:			Community affiliations (Clubs, Service Organizations, etc.): 		
Telephone:						
City:		te: Zip:				
Mailing Address (if different	t):					
			Do you have children in the program?	YES	NO_	
Previous states resided in the	he past 5 years:		If yes, at what level?			
Date of Birth:			Special Certification (i.e. CPR, Medical, etc.):			
(mr	m / dd / yyyy)		Have you ever been charged with or convicted of a felony?	YES	NO	
Social Security Number:			If yes, provide your current legal status (parole, etc.)			
Occupation:			Have you ever been convicted of any crime involving or against a minor?			
Cronley or				YES	NO_	
Address:			Have you ever plead guilty to, been convicted of or involved with any other type of crime?			
	i. 0	-0 110		YES	NO_	
Do you have a valid driver's	s license? YI	ES NO		. •		
Oriver's License#:		State:	If YES to ANY of the above, explain:	YES	NO_	
which of the following	would you like to particip	ate? ("X" one or more.)				
eague Official:	Head Coach:	Board Member:	Equipment Manager.	Assist. Coach:		
Team Mom:	Coach Trainee:	Trainer:	Student Demo:			
Other:						

Spring Volunteer Application. (Page 2) Do NOT use forms from past years. (Complete BOTH Pages)

PLEASI	E NOTE: A copy of a valid governmen	t-issued photo identification must be atta	ched to this appi	ication.
Name:	Nature of Relationship:			Phone #:
			_	
I hereby swear and attest that all information provided on this have made any false statements or material misrepresentation of database records including but not limited to sex offender reconditional upon the league receiving no inappropriate informemployees and volunteers thereof, and/or any other person or	s, written or verbal. As a condition of vogistries, child abuse and criminal history nation on my background. I hereby rel	olunteering, I hereby grant permission to Nap r records in compliance with Naples Bear's c ease and agree to hold harmless from liab	les Bears to condu hild protection poli	uct a background check on me, which may include a reviecy. I understand and agree that, if appointed, my position in
I also understand that, regardless of previous appointments, President and removal by the Board of Directors for any and all Bears and its partners permission to utilize such contact inform	Il violations of Naples Bears policies or p	orinciples. Furthermore, I hereby attest that a		
Applicant Signat	ure			Date
Applicant Name (Print or Type): NOTE: Naples Bears will not discriminate against any person of	on the basis of race, creed, color, national	al origin, marital status, gender, sexual orient	ation or disability.	
For Local Use Only. Below please print the legal nate Background check completed by Association officer:	me of the individual who performed	the background check on the applican	t and name of th	e local organization.
or Background check completed by <u>League</u> officer:				
or completed by:		Date Completed:		
	System(s) used for background	und check (minimum of one must ha	ve "X"):	
Online multistate database: State/Federal (Choicepoint, etc.)	Criminal History Records:	FEDERAL Sex Offender Regis	try	Other (please explain):
**NOTE: A State	Sex Offender Registry check alone is N	IOT sufficient to comply with Article 21 and I	MUST be	supplemented by one or more of the above.
LEAGUES: You m	ust maintain copies of background c	heck results at the league level for the du	ration of the volu	nteer's service.