## South Valley Athletics Volunteer Application 2020-2021

Contact Information (please write in white boxes, not gray)		
Name		
Mailing Address		
City/State/Zip		
Home Phone		
Cell Phone		
Text OK? Write yes or no		
Birthday (MM/DD/YY)		
Email address		
Grade (2020/2021 school year)	If not in school, please write n/a	
Preferred method of contact (circle one) Text Call: Cell or Home Email		
***Shirt size (does not apply to re	eferees) (circle one) S M L >	XL 2XL 3XL 4XL
***You will only receive a shirt if you sign up to coach BEFORE we order shirts***		
	Interests	
Tell us in which areas you are interested in helping. Check all that apply.		
Youth soccer	Youth cheer	Finance
Youth volleyball	Adult soccer (must be 18+)	Fundraising
Youth basketball	Board of Directors	Volunteer coordinator
Tennis camp Head coach	Referee/scorekeeper	Special events
	Setup/cleanup at games	General cleanup of grounds
Assistant coach only (for sports marked)		
<u> </u>	ills, Qualifications or Previo	•
· ·	and qualifications you have acquire	· · · · · · · · · · · · · · · · · · ·
· · · · · · · · · · · · · · · · · · ·	other activities, including hobbies	
If signing up to be a referee, please list if you have ever been a referee or not.		
Previous Board Experience (if applying for board position)		
Summarize your previous board/volunteer experience.		
Summanze your previous sourcy volunteer experience.		

## Please complete other side

Phone: 541.942.3079

(call or text)

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2020-2021		
Reference (retu	rning coaches do not need to fill this section out)	
Please provide a personal or professional reference.		
Name	İ	
Mailing Address		
City/State/Zip		
Phone		
Relationship to you		
Pe	rson to Notify in Case of Emergency	
Name	, , ,	
Relationship to you		
Street Address		
City/State/Zip		
Home Phone		
Cell Phone		
Work Phone		
	Agreement and Signature	
or other misrepresentations	ccepted as a coach/board member, any false statements, omissions, made by me on this application may result in my immediate dismissal.	
Name (PRINTED) Signature		
Parent name (if under 18)		
Parent signature		
Date		
Date		
Background Consent Form (18+ only)		
	pard member I am required to fill out a background check consent form.	
If I do not fill one out, I will not be eligible to coach or be on the Board of Directors.		
Initial		
	Our Policy	
It is the policy of this organization to provide equal opportunities without regard to race, color, religion,		
national origin, gender, sexual pr	reference, age, or disability.	
Thank you for completing t	this application form and for your interest in volunteering with us.	
OFFICE USE ONLY:		
	Application approved: YES NO	
Background check completed (date):		

## Please complete other side