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 referees) (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	Referee/scorekeeper	Special events		
Head coach	Setup/cleanup at games	General cleanup of grounds		
Assistant coach only (fo	r sports marked)			

Special Skills, Qualifications or Previous Experience

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports; coaching experience. 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.

Please complete other side

www.southvalleyathletics.org southvalleyathletics@gmail.com Phone: 541.942.3079 (call or text)

PO Box 1565/211 N. 9th Street Cottage Grove, OR 97424

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Reference (returning coaches do not need to fill this section out)		
Please provide a personal or professional reference.		
Name		
Mailing Address		
City/State/Zip		
Phone		
Relationship to you		

Person to Notify in Case of Emergency		
Name		
Relationship to you		
Street Address		
City/State/Zip		
Home Phone		
Cell Phone		
Work Phone		

Agreement and Signature		
By submitting this application, I affirm that the facts set forth in it are true and complete.		
I understand that if I am accepted as a coach/board member, any false statements, omissions,		
or other misrepresentations made by me on this application may result in my immediate dismissal.		
Name (PRINTED)		
Signature		
Parent name (if under 18)		
Parent signature		
Date		

Background Consent Form (18+ only)

I am aware that to be a coach/board 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 preference, age, or disability.

Thank you for completing 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

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