

South Valley Athletics Volunteer Application
2017-2018

Contact Information		
Name		
Mailing Address		
City/State/Zip		
Home Phone		
Cell Phone		Text OK? (circle one) Yes No
Work Phone		
Birthday (MM/DD/YY)		
Email address		
Preferred method of contact (circle one) Text Call: Cell or Home Email		
Which phone number do you want given out to parents (circle one)? Cell Home Both		
Shirt size (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.		
<input type="checkbox"/> Youth soccer	<input type="checkbox"/> Youth cheer	<input type="checkbox"/> Finance
<input type="checkbox"/> Youth volleyball	<input type="checkbox"/> Adult soccer (refing)	<input type="checkbox"/> Fundraising
<input type="checkbox"/> Youth basketball	<input type="checkbox"/> Board of Directors	<input type="checkbox"/> Volunteer coordinator
<input type="checkbox"/> Tennis camp	<input type="checkbox"/> Refing	<input type="checkbox"/> Special events
<input type="checkbox"/> Head coach	<input type="checkbox"/> Setup/cleanup at games	<input type="checkbox"/> General cleanup of grounds
<input type="checkbox"/> Assistant coach only (for 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.

Previous Board Experience (if applying for board position)
Summarize your previous board/volunteer experience.

Please complete other side

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Reference (returning coaches ONLY 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	
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