



OXFORD YOUTH ASSOCIATION VOLUNTEER APPLICATION

A copy of valid government issued photo identification must be attached to complete this application.

Name _____ Date _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____
 Business Phone _____
 Date of Birth _____ Social Security # _____
 Occupation _____
 Employer _____
 Address _____
 Special professional training, skills, and hobbies: _____

Community affiliations (Clubs, Service Organizations, etc.): _____

Previous volunteer experience (including baseball/softball and year): _____

Do you have children in the program? Yes No
 If yes, at what level? _____

Special Certification (i.e. CPR, Medical, etc.): _____

Do you have a valid driver's license: Yes No
 Driver's License #: _____ State _____

Have you ever been convicted of or plead guilty to any crime(s): Yes No
 If yes, describe each in full: _____

Have you ever been refused participation in any other youth programs? Yes No
 If yes, explain: _____

In which of the following would you like to participate? (Check one or more.)

- Sports Director Coach Umpire Concession Stand Other

Please list three references, at least one of which has knowledge of your participation as a volunteer in a youth program:

Name Phone _____

As a condition of volunteering, I give permission for the Oxford Youth Association to conduct a background check on me that will include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the OYA receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the Oxford Youth Association, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments Oxford Youth Association is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Governors for violation of the Oxford Youth Association policies or principles.

The Oxford Youth Association will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

I acknowledge receipt of the Complaint Form Regulations, Complaint form, and the OYA Bylaws Article 3, Section 3, Subsection a b and agree to abide by the OYA Code Of Conduct

Applicant Signature _____ Date _____
 Applicant Name (please print or type) _____