

Volunteer Application

Name _____ Child's Name _____

Email Address: _____ Phone: _____

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

◆ Manager ◆ Coach ◆ Umpire ◆ Scorekeeper

◆ Other _____

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization to conduct background check(s) on me now and as long as I continue to be active with the organization, which may include a review of sex offender registries (some of which contain name only searches which may result in a report being generated that may or may not be me), child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Incorporated, 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, Little League 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 Directors for violation of Little League policies or principles

Signature: _____ Date: _____

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Date Approved: _____ Confirmation Number: _____

Approved By: _____ Team Name: _____