

# Vacaville Bengals Youth Football & Cheer Inc.

**Official 2010 Volunteer Application (Complete BOTH Pages) Do NOT use forms from previous years.**

**PLEASE NOTE: A copy of a valid government-issued photo identification must be attached to this application.**

Name: _____	Date: _____	Special professional training, skills, hobbies: _____
Prior/Maiden Names or Aliases: _____		
Address: _____		Community affiliations (Clubs, Service Organizations, etc.): _____
Telephone: _____	Email: _____	
City: _____	State: _____	Zip: _____
Mailing Address (if different): _____		Previous/current volunteer experience (e.g. baseball/softball and years): _____
Do you have children in the program? YES _____ NO _____		
Previous states resided in the past 5 years: _____	If yes, at what level? _____	
Date of Birth: _____ (mm / dd / yyyy)	Special Certification (i.e. CPR, Medical, etc.): _____	
Social Security Number: _____	Have you ever been convicted of a felony? YES _____ NO _____	
Occupation: _____	If yes, provide your current legal status (parole, etc.) _____	
Employer: _____	Have you ever been convicted of <b>any</b> crime involving or against a minor? YES _____ NO _____	
Address: _____	Have you ever plead guilty to, been convicted of or involved with any other type of crime? If yes, explain: YES _____ NO _____	
Do you have a valid driver's license? YES _____ NO _____		
Driver's License#: _____	State: _____	
	Have you ever been refused participation in any other youth programs? If yes, explain: YES _____ NO _____	

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

League Official: _____	Head Coach: _____	Board Member: _____	Equipment Manager: _____	Assist. Coach: _____
Team Mom: _____	Coach Trainee: _____	Trainer: _____	Student Demo: _____	
Other: _____				

**Privacy Policy: Your privacy is important to us. VBYFC does not sell or release contact information to any non-affiliated organization. However, VBYFC and its partners may contact you with essential program information as well as special offers and promotions. Please be advised that partners are not permitted to retain your information for non-VBYFC use unless you specifically grant them permission. Please contact the VBYFC in writing for opt out information.**

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

<b><u>Name:</u></b>	<b><u>Nature of Relationship:</u></b>	<b><u>Phone #:</u></b>
_____	_____	_____
_____	_____	_____
_____	_____	_____

I hereby swear and attest that all information provided on this application is true and complete to the fullest extent of my knowledge. If I am accepted as a volunteer, VBYFC may end the relationship immediately if I have made any false statements or material misrepresentations, written or verbal. As a condition of volunteering, I hereby grant permission to VBYFC to conduct a background check on me, which may include a review of database records including but not limited to sex offender registries, child abuse and criminal history records in compliance with VBYFC's child protection policy. I understand and agree 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 VBYFC, Incorporated, the officers, employees and volunteers thereof, and/or any other person or organization that may provide such information.

I also understand that, regardless of previous appointments, VBYFC is not obligated to appoint me to a volunteer position. 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 any and all violations of VBYFC policies or principles. Furthermore, I hereby attest that all contact information provided herein is up to date and I hereby grant VBYFC, and its partners permission to utilize such contact information for communications and promotions during my tenure as a volunteer.

**Binding Arbitration Policy:**

**If appointed, I hereby understand and agree that any and all civil disputes by and between myself, VBYFC and any and all affiliated parties will be subject to binding arbitration in the locale of the VBYFC in accordance with California law under the guidelines and rules of the American Arbitration Association. I hereby agree that this binding arbitration shall be in lieu of any litigation by and between myself, VBYFC and any and all affiliated parties. If any portion of this application shall be deemed unenforceable or invalid, this arbitration agreement shall still remain in full force and effect.**

<b>Applicant Signature</b>	<b>Date</b>
<b>Applicant Name (Print or Type):</b> _____	

NOTE: VBYFC will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

**For Local Use Only.** Below please print the **legal name** of the individual who performed the background check on the applicant and name of the local organization.

Background check completed by Association officer: \_\_\_\_\_  
or

Background check completed by League officer: \_\_\_\_\_  
or

completed by: \_\_\_\_\_ Date Completed: \_\_\_\_\_

**System(s) used for background check (minimum of one must have "X"):**

Online multistate database: \_\_\_\_\_ State/Federal Criminal History Records: \_\_\_\_\_ FEDERAL Sex Offender Registry \_\_\_\_\_ Other (please explain): \_\_\_\_\_  
(Choicepoint, etc.)

**\*\* NOTE: A State Sex Offender Registry check alone is NOT sufficient to comply with Article 21 and MUST be supplemented by one or more of the above**

**LEAGUES: You must maintain copies of background check results at the league level for the duration of the volunteer's service.**