



2019 Manager and Coach Form - Side 1

Our Address:
Munster Girl's Softball
P.O. Box 3593
Munster, IN 46321

A copy of a valid Government issued photo ID must be attached to this form.

Last Name:	First Name:	Today's Date:
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Street Address:	City:	State:	Zip Code:
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Phone:	Primary Email Address:
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Occupation:	SS#: (Mandatory upon request or with LexisNexis)
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Employer:

Employer Address:	City:	State:	Zip Code:
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Special Professional Training, Skills, Hobbies, etc.:

Community Affiliations; Clubs, Service Organizations, etc.:

Previous Volunteer Experience; Baseball, Softball, Soccer, etc. and The Year/s:

Do you have children in the MGS Program? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, list full name/s and what level?	Please list any special certifications; CPR, Medical, etc.:
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Do you have a valid Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No	Driver's License#: _____ State: _____
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****SEE OTHER SIDE FOR MORE INFORMATION AND SIGNATURE****



2019 Manager and Coach Form - Side 2

Our Address:
Munster Girl's Softball
P.O. Box 3593
Munster, IN 46321

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Have you ever been convicted of, or plead guilty to any crime/s? Yes No
 If Yes, describe each in full:

Are there criminal charges pending against you regarding any crime/s involving or against a minor? If Yes, describe each in full: Yes No

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

In which of the following would you like to participate? Please check 1 or more.

League Official Manager
 Coach Umpire Fields
 Score Keeper Other

List 3 references - **Name & Phone.** One should have knowledge of your participation as a volunteer in a youth program:

1. _____
 2. _____
 3. _____

AS A CONDITION OF VOLUNTEERING, I give permission for the Munster Girl's Softball organization to conduct a background check on me, which may include a review of sex offender registries, 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 Munster Girl's Softball, 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, Munster Girl's Softball 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 Munster Girl's Softball policies or principles.

Applicant Signature: _____ Date: _____

Applicant Name: please print _____

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

*Local League Use Only

Background check completed by League Officer: _____ Date: _____

System used for background check: Minimum of 1 must be checked

Sex Offender Registry Criminal History Records *LexisNexis

*Please be advised that if you use LexisNexis and there is a name match in the few states where only name match searches can be performed, you should notify volunteers that they will receive a letter directly from LexisNexis in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.

Only attach to this application, copies of background check reports that reveal convictions of this application.