



VOLUNTEER APPLICATION

A COPY OF A VALID GOVERNMENT-ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO THIS APPLICATION!

Legal Name: _____ Prior/Maiden Names/Aliases: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Previous states resided in the past 5 years: _____

Date of Birth: _____ Social Security Number: _____

Occupation: _____ Employer: _____

Employer's Address: _____

City: _____ State: _____ Zip: _____

Do you have a valid driver's license?.....Yes No

Driver's License #: _____ State: _____

Special professional training, skills, hobbies: _____

Community affiliations: _____

Previous/current volunteer experience: _____

Special Certifications: _____

Do you have children in the program?Yes No

If yes, what level? _____

Have you ever been charged with or convicted of a felony?.....Yes No

If yes, provide current legal status: _____

Have you ever been convicted of any crime involving or against a minor?Yes No

Have you ever plead guilty to or been convicted of or involved with any type of crime?Yes No

Have you ever been refused participation in any other youth programs?.....Yes No

If YES to any of the above, please explain: _____

In which of the following would you like to participate?

- League Official Board Member Head Coach Assistant Coach Team Manager
- Coach Trainee Other: _____

Association Name: _____

Personal References:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

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, Inland Northwest Youth Football & Cheer League (“INYFCL”) 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 INYFCL 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 INYFCL'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 INYFCL, 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, INYFCL 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 all violations of INYFCL policies or principles.

Binding Arbitration Policy:

If appointed, I hereby understand and agree that all civil disputes by and between myself, INYFCL and all affiliated parties will be subject to binding arbitration in the locale of the INYFCL. Local Office in Spokane, WA in accordance with Washington 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, INYFCL and all affiliated parties. If any portion of this application shall be deemed unenforceable or invalid, this arbitration agreement shall remain in full force and effect.

Applicant Signature: _____ Date: _____

Printed Name: _____

For Local Use Only. Please provide the legal name of the individual who performed the background check on the applicant.

Background check completed by: _____

Date Completed: _____

- Online multistate database State/Fed Criminal History Records Federal Sex Offender Registry
- Other _____