



VALRICO RAMS YOUTH SPORTS, INC.
CHEERLEADING & FOOTBALL SINCE 2006



VOLUNTEER APPLICATION

INFORMATION ABOUT THE APPLICANT			
FULL NAME (LAST, FIRST, MIDDLE INT)		HOME PHONE #	DATE OF BIRTH
FULL HOME ADDRESS		CELL #	
		WORK #	
		E - MAIL	
OCCUPATION			
EMERGENCY CONTACT INFORMATION			
EMERGENCY CONTACT NAME		EMERGENCY CONTACT #	
PROFESSIONAL TRAINING, SKILLS, HOBBIES OR OTHER QUALIFYING EXPERIENCE			
INFORMATION ABOUT YOUR PREVIOUS COMMUNITY CLUBS, ORGANIZATIONS, YOUTH SPORTS TEAMS			
ORGANIZATION NAME	DATE(S)	REFERENCE NAME(S)	REFERENCE #
FOOTBALL OR CHEERLEADING EXPERIENCE			
ORGANIZATION(S) NAME & LOCATION	EXPERIENCE/ RESPONSIBILITIES		DATE(S)
POSITIONS INTERESTED IN. LIST IN ORDER OF PREFERENCE			
1.	2.	3.	
4.	5.	6.	
CERTIFICATIONS (CPR, USA, Pop Warner, etc.) Please provide copies if possible			
TYPE	LOCATION	DATES	COPIES (Y/N)
REQUIRED LEGAL QUESTIONS (MUST BE ANSWERED FULLY AND TRUTHFULLY TO BE CONSIDERED FOR A POSITION)			
HAVE YOU EVER BEEN CONVICTED OF OR PLEADED GUILTY TO ANY CRIME(S)	YES/NO		IF YES, DESCRIBE IN DETAIL



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HAVE YOU EVER BEEN REFUSED PARTICIPATION OR DISMISSED FROM ANY OTHER YOUTH PROGRAMS:	YES/NO	IF YES, DESCRIBE IN DETAIL

WHY DO YOU WANT TO BE A VALRICO RAM VOLUNTEER/COACH? EXPLAIN BELOW

DISCLAIMER

As a condition of volunteering, I give permission for the Valrico Rams Youth Sports, Inc./Pop Warner Little Scholars, Inc. organizations 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 the Valrico Rams Youth Sports, Inc., 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, Valrico Rams Youth Sports, Inc. 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 Executive Board and removal by the Board of Directors for violation of Valrico Rams Policies or Principles.

AS AN ADDITIONAL CONDITION OF VOLUNTEERING, I AGREE TO ATTEND ALL EVENTS POSSIBLE IN WHICH THE RAMS ARE PARTICIPATING. IF FOR ANY REASON I CAN NOT ATTEND ANY EVENT I WILL NOTIFY THE ATHLETIC DIRECTOR, CHEER DIRECTOR OR PRESIDENT IN ADVANCE.

Date: _____

Applicants Signature _____

Applicants Name (please print) _____

NOTE: The Valrico Rams Youth Sports Inc. will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

BACKGROUND CHECKS, POP WARNER TRAINING, COUNTY CLASSES, CPR/FIRST AID AND CONCUSSION TRAINING ARE REQUIRED FOR ALL WHO WISH TO BE AN ORGANIZATIONAL VOLUNTEER FOR THE VALRICO RAMS (BOARD, COACHES, TEAM PARENT, ETC) OR ANYONE WITH ON FIELD RESPONSIBILITIES. Note please see Football/Cheer Directors for information.