



# Newport Select Boys Basketball Club—Volunteer Application

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Special professional training, skills, hobbies: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Community affiliations (Clubs, Service Organizations, etc.):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Previous volunteer experience (including year):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have children in the program? Yes No If yes, list full name and level? \_\_\_\_\_

Special Certification (CPR, Medical, etc.): \_\_\_\_\_

Do you have a valid driver's license: Yes No

Have you ever been convicted of or plead guilty to any crime(s): Yes No

If yes, describe each in full: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are there any criminal charges pending against you regarding any crime(s) involving or against a minor? Yes No

If yes, describe each in full: \_\_\_\_\_

Have you ever been refused participation in any other youth programs?

Yes No

If yes, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

Board Member Coach Scorekeeper Concession Stand Other

If coaching, indicate: Head Coach Assistant Coach

Grade: 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup>

Please list three references, at least one of which has knowledge of your participation as a volunteer in a youth program, providing name, phone number and email:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

AS A CONDITION OF VOLUNTEERING, I give permission for the NSBBC 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 NSBBC, 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, NSBBC 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 or removal by the Board of Directors for violation of NSBBC policies or principles.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_