



## VOLUNTEER APPLICATION

**A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION.**

Name \_\_\_\_\_ Date \_\_\_\_\_  
(LAST) (FIRST) (M.I.)

Address \_\_\_\_\_  
(no.) (street) (city) (state) (zip) (country)

Birthdate \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone: Work (\_\_\_\_\_) \_\_\_\_\_ Home (\_\_\_\_\_) \_\_\_\_\_

Cell (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Address \_\_\_\_\_  
(no.) (street) (city) (state) (zip) (country)

Other Names Known As \_\_\_\_\_

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

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

Previous volunteer experience (including baseball/softball and 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

Driver's License#: \_\_\_\_\_ State: \_\_\_\_\_

Have you ever been convicted of or pled guilty to 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 capacities would you like to participate?

- |   |                                  |  |
|---|----------------------------------|--|
| <input type="checkbox"/> League official  | <input type="checkbox"/> Manager | <input type="checkbox"/> Coach             |
| <input type="checkbox"/> Scorekeeper      | <input type="checkbox"/> Umpire  | <input type="checkbox"/> Field Maintenance |
| <input type="checkbox"/> Concession Stand | <input type="checkbox"/> Other   |  |

Please list three references, at least one of whom has knowledge of your participation as a volunteer in a youth program:

1. Name/Phone \_\_\_\_\_
2. Name/Phone \_\_\_\_\_
3. Name/Phone \_\_\_\_\_

**AS A CONDITION OF VOLUNTEERING,** I give permission for the RBI League to conduct background check(s) on me now and as long as I continue to be active with the organization, 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 information on my background that gives them concern. I hereby release and agree to hold harmless from liability the local RBI league, Major League Baseball entities and their affiliates, the officers, employees and volunteers thereof, or any other person or organization that may provide or receive such information. I also understand that, regardless of previous appointments, RBI is not obligated to appoint me to a volunteer/staff position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension and/or removal by the League Administrator and/or the Board of Directors for violation of RBI policies or principles and/or for any matter giving rise to concerns for the safety of minors.

\_\_\_\_\_  
Applicant (Signature) Date

\_\_\_\_\_  
Applicant Name (Please Print) Date

Local League Use Only:

Background check completed by league officer:  
on:

System(s) used for background check (minimum of one must be checked):  
 Sex Offender Registry  Criminal History Records