

SAY Volunteer Application Form



Please **PRINT** all information. Applicant **MUST** fill in all ↓ ↓ areas.

FIRST NAME ↓		INITIAL ↓	LAST NAME ↓	
*STREET ADDRESS ↓				
CITY ↓		STATE ↓	Zip ↓	
HOME PHONE ↓	()	WORK PHONE ↓	()	
DATE of BIRTH ↓		YEARS LIVED AT ABOVE ADDRESS ↓		
MO.:	DATE:	YEAR:		
DRIVER LICENSE# ↓		STATE ISSUED ↓	EXPIRATION ↓	

I am a returning volunteer. I indicated my "Personal History" last year. YES NO

My "personal History" has has not changed since last year.

All volunteers NEW and RETURNING must complete the following.

PERSONAL HISTORY ↓	YES	NO
Have you ever been found guilty by a court or other tribunal to have committed a violent act against another person, engaged in any misconduct involving a juvenile OR been convicted of a crime except for a minor traffic violation?		

NOTE: SAY, at its discretion, may use the above information to conduct a criminal background check regardless of the response on "Personal History".

As an applicant for a Soccer Association for Youth (SAY) volunteer position, I hereby attest to the truthfulness of the representations I have made, including the information provided in response to the questions regarding my criminal history. I authorize SAY to verify the above information and waive any right to confidentiality with respect to the information requested. If requested by SAY, I will submit my fingerprints for that purpose.

↓ _____
Applicant Signature _____
Date

AREA USE ONLY

SAY AREA:

AREA VOLUNTEER ADMINISTRATOR
Must be signed if a "YES" Response

Date