

◆◆◆ LITTLE LEAGUE BASEBALL CANADA VOLUNTEER APPLICATION FOR 2013 ◆◆◆  
**Do not use forms from past years.** Use extra paper to complete if additional space is required.

Name \_\_\_\_\_ Age over 19 Yes ☐ No ☐

Address \_\_\_\_\_

City \_\_\_\_\_ Prov. \_\_\_\_\_ Postal code \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ Business \_\_\_\_\_

E-mail address \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

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

Community affiliations (clubs, service organisations, etc.): \_\_\_\_\_

Previous volunteer experience (including baseball/softball) and year: \_\_\_\_\_

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

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

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

Driver's license #: \_\_\_\_\_ Prov. \_\_\_\_\_

Have you ever been refused participation in any other youth sports program?

Yes ☐ No ☐

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

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

League Official ☐ Coach ☐ Umpire ☐ Field Maintenance ☐

Manager ☐ Scorekeeper ☐ Concession Stand ☐ Other ☐

Please list three references, at least one of which has knowledge of your participation as a volunteer in a youth program. Do not use a family member as a reference. Indicate if the reference is aware that you are using him/her as a reference:

**Name**

**Phone**

Little League Baseball Canada has implemented a screening program for all Little League volunteers. As a condition of volunteering, I give permission for the Little League organization to conduct a background check on me which may include a review of sex offender registries, child abuse and police 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 local Little League, Little League Baseball Canada, Little League Baseball Incorporated, 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, Little League 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 President and removal by the Board of Directors for violation of Little League policies or principles.

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

Applicant Name (please print or type) \_\_\_\_\_

*NOTE: The local Little League, Little League Baseball Canada, and Little League Baseball Incorporated will not discriminate against any person on the basis of race, creed, colour, national origin, marital status, gender, sexual orientation, or disability.*

**Local League Use Only:**

Background check completed by league officer \_\_\_\_\_

on \_\_\_\_\_

*Attach copy of background check reports that reveal convictions of this applicant.*

**"Help Keep Our Little Leaguer's Safe"**