

# VOLUNTEERING

MUKILTEO LITTLE LEAGUE  
BASEBALL AND SOFTBALL / 2012

Mukilteo Little League is a 100% volunteer-driven organization. We count on parents, grandparents and friends of the league to volunteer and ensure that the league provides a high quality experience for your athlete.

If you would like to volunteer with the league or with your child's team this season, please fill out this form and the volunteer background check form (along with a copy of your driver's license), and send in to our league.

## 1 VOLUNTEER OPPORTUNITIES

I would like to volunteer in the following areas (please check all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Manager                 | <input type="checkbox"/> Scorekeeping  |
| <input type="checkbox"/> Coach                   | <input type="checkbox"/> Team Parent   |
| <input type="checkbox"/> Umpire                  | <input type="checkbox"/> Concessions ( <i>requires Food Handler's Permit</i> ) |
| <input type="checkbox"/> Field Maintenance       | <input type="checkbox"/> Sponsor   |
| <input type="checkbox"/> Field Work Parties      | <input type="checkbox"/> Special Events (Opening Day, Pitch Hit & Run, etc.)   |
| <input type="checkbox"/> Picture Day Coordinator | <input type="checkbox"/> Other / Where Needed                                  |

*MLL staff or your child's manager will provide more information and specific contacts for volunteer opportunities at your team meeting or throughout the season.*

## 2 CONTACT INFORMATION

Parent Name(s)

Player Name(s)

Division (*circle all that apply*)  Baseball  Softball

Level (*circle all that apply*)  Majors  Minors  Farm  Rookie  Tee Ball

Primary Phone

Alternate Phone

E-Mail

## 3 SIGNATURE

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**RETURN THIS FORM TO ANY MLL BOARD MEMBER OR MAIL TO:**

Mukilteo Little League / Volunteering • P.O. Box 1058 • Mukilteo, WA 98275

**THANK YOU FOR SUPPORTING MUKILTEO LITTLE LEAGUE!**



# Little League Volunteer Application -2012

Do not use forms from past years. Use extra paper to complete if additional space is required.

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

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

Address \_\_\_\_\_

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

Cell Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

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

Occupation \_\_\_\_\_

Social Security # (mandatory upon request or with LexisNexis) \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

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 what 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 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.)

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:

**Name/Phone**

\_\_\_\_\_  
\_\_\_\_\_

AS A CONDITION OF VOLUNTEERING, I give permission for the Little League organization 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 inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, 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 \_\_\_\_\_

If Minor/Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

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

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

### 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  \*LexisNexis

*\*Please be advised that if you use LexisNexis and there is a name match in the few states where only name match searches can be performed you should notify volunteers that they will receive a letter directly from LexisNexis in compliance with the Fair Credit Reporting Act containing information regarding all the criminal records associated with the name, which may not necessarily be the league volunteer.*

**Only attach to this application copies of background check reports that reveal convictions of this application.**