



A copy of valid government issued photo identification must be attached to complete this application.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

I am interested in:	
<i>Football</i>	<i>Cheerleading</i>
Head Coach	Head Coach
Assistant Coach	Assistant Coach
Other (Describe)	Other (Describe)
Describe:	_____
Age Group (Circle)	1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup> 4 <sup>th</sup> 5 <sup>th</sup> 6 <sup>th</sup> Grade

Past Coaching Experience (If Applicable): \_\_\_\_\_

Past Playing Experience, Professional Training, or Civic Activities and Positions: \_\_\_\_\_

## 2010 Volunteer Application

Do you have children in the LYF Program? Yes No

If yes, at what level? \_\_\_\_\_

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

Name \_\_\_\_\_ Phone \_\_\_\_\_

Have you ever been convicted of or plead guilty to a crime? Yes No

If yes, describe: \_\_\_\_\_

Have you ever been refused participation in any other youth program? Yes No

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

As a condition of volunteering, I give permission for Loveland Youth Football, Inc. (LYF) 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 LYF receiving no inappropriate information in my background. I hereby release and agree to hold harmless from liability LYF, its officers, employees and volunteers thereof, or any person or organization that may provide such information. I have received and read the LYF Child Safety and Screening Policy. Furthermore, I agree to abide by LYF policies, procedures, and Code of Ethics, and participate in all LYF required activities including coaching clinics, CPR Certification, and NYSCA Certification.

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

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

LYF Use Only:	
Date Interviewed: _____	By: _____
Date of Background Check: _____	By: _____