

# SAY Volunteer Application Form

\*Head Coach: \_\_\_\_\_ (required) \*Player Age: \_\_\_\_\_

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

<b>* FIRST NAME</b>		<b>INITIAL</b>	<b>*LAST NAME</b>	
<b>*STREET ADDRESS</b>				
<b>*CITY</b>		<b>*STATE</b>	<b>*Zip</b>	
<b>*HOME PHONE</b>			<b>WORK PHONE</b>	
<b>*DATE of BIRTH</b>		<b>*YEARS LIVED AT ABOVE ADDRESS</b>		
<b>MO.:</b>	<b>DATE:</b>	<b>YEAR:</b>		
<b>*DRIVER LICENSE#</b>		<b>*STATE ISSUED</b>	<b>*EXPIRATION (MM/DD/YYYY)</b>	

**\*If above address is less than five years, please indicate prior address.**

<b>STREET ADDRESS</b>		
<b>CITY</b>	<b>STATE</b>	<b>Zip</b>
<b>HOME PHONE</b>	<b>YEARS LIVED AT ABOVE ADDRESS</b>	

<b>PERSONAL HISTORY</b>	<b>YES</b>	<b>NO</b>
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.

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Applicant Signature

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Date

**AREA USE ONLY**

SAY AREA:    
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**AREA VOLUNTEER ADMINISTRATOR**  
Must be signed if a "YES" Response

\_\_\_\_\_  
Date