



Mid-State Youth Football & Cheerleading Conference

http://www.mid-stateyouthfootball.org

2016 Volunteer Application

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

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

Home Phone: ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

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

Position applying for: \_\_\_\_\_

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

Community affiliations (Clubs, Service Organizations, etc.) \_\_\_\_\_

Reason for Volunteering: \_\_\_\_\_

Do you have children in the program: \_\_\_ yes \_\_\_ no

Special Certifications (ie: CPR, EMT, Medical, etc.) \_\_\_\_\_

Have you ever been convicted of or plead guilty to any crime(s): \_\_\_ yes \_\_\_ no

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

Have you ever been refused participation in any youth programs? \_\_\_yes \_\_\_ no

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

Table with 2 columns: Name, Phone. Rows 1, 2, 3.

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