



# El Segundo Girls Softball

PO Box 584

El Segundo, CA 90245

[www.elseaundogirlssoftball.com](http://www.elseaundogirlssoftball.com)



## Volunteer Application

Please check all boxes applicable:

Manager     Coach     Chaperone     Team Parent     Umpire     Board Position

It is our policy to comply with all applicable state and federal laws prohibiting discrimination based on race, age, color, sex, religion, national origin or other protected classifications.

Your Name: \_\_\_\_\_ Division Requested: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Number City State Zip

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

Work Phone: \_\_\_\_\_ \* Email: \_\_\_\_\_

\* Email is required for league correspondence

Name(s) of Child(ren) & Division(s): \_\_\_\_\_

Would like to manage or coach with: \_\_\_\_\_ Division: \_\_\_\_\_

Are you over 18 years of age?     Yes     No    If under 18, specify age: \_\_\_\_\_

Have you ever been convicted of a felony?     Yes     No

If yes, please describe conditions: \_\_\_\_\_

Do you agree to a background check?     Yes     No

ASA requires leagues to do background checks on all coaching/support staff. Please read & sign page 2 of the Volunteer Form. If you filled out this form previously for ESGS, then you only need to sign the form agreeing to the background check. (Convictions will not necessarily disqualify an applicant from coaching in the League.)

Have you previously managed, coached or volunteered in a softball or other youth sports organization?     Yes     No

If yes, please list previous experience and dates: \_\_\_\_\_

### WAIVER OF LIABILITY AND DISCLAIMER

The volunteer will be participating in a girl's softball program. As such, the volunteer will be subject to catching and hitting balls thrown at a high rate of speed; catching balls in the air and on the ground that are hit at a high rate of speed; running at a high rate of speed; sliding into bases; possible collision with other participants; possibly being hit by a thrown or hit ball; and other elements common in the sport of softball.

In consideration for being permitted by El Segundo Girls Softball (ESGS) to participate in the above activity, I, the undersigned hereby give my consent and agree to release, indemnify and hold harmless ESGS, its officials, coaching staffs and representatives, from any claim arising out of injury to the named individual. I also hold harmless ESGS, its officials, coaching staffs and representatives, from any claim arising out of injuries or conditions caused or aggravated by my refusal to obtain available medical treatment based on religious or philosophical beliefs or otherwise.

### ACKNOWLEDGEMENT AND CONSENT

For both internal and external use, I acknowledge that ESGS may compile address, phone number and mailing labels and may utilize softball photographs of the named individual. I consent to such uses and hereby waive all rights to compensation.

\_\_\_\_\_  
Signature (If under the age of 18, your Parent/Guardian is required to sign.)

\_\_\_\_\_  
Date



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### ASA

### NOTICE OF BACKGROUND CHECK

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING BELOW]

The Amateur Softball Association (ASA) is a volunteer driven not-for-profit organization. One of ASA's objectives is to promote proper safeguards in accordance with the spirit of true sportsmanship and establish principles for ethical behavior in the sport of Softball. You have expressed an interest in becoming a member of ASA on a voluntary basis. Consistent with promoting wholesome and safe competition, ASA may perform criminal background and/or motor vehicle record (or "driving record") checks on you pursuant to your written instructions below. Accordingly, ASA may obtain reports on your criminal background and/or driving history from a "consumer reporting agency" The report may include information gathered from county, federal and/or statewide record searches, as guided by personal identifier information obtained through a Social Security Number trace. Note: Conducting a Social Security Trace does NOT access the subject's credit history nor affects the subject's credit score or credit rating.

Please note that by signing below you are authorizing and instructing ASA to immediately obtain criminal background and driving record reports from a third party (utilizing a Social Security Number trace) as ASA deems necessary and appropriate. Moreover, you are allowing and instructing ASA to obtain those reports from a third party on an ongoing basis without any additional notice for as long as you are a volunteer member of the ASA.

### AUTHORIZATION AND INSTRUCTION

I acknowledge receipt of the NOTICE OF BACKGROUND CHECK and certify that I have read and understand that notice. I hereby authorize and instruct ASA to obtain criminal background and/or driving record reports from a third party (utilizing a Social Security Number trace) as ASA deems necessary and appropriate. This authorization and instruction will take immediate effect when I sign below, and will last throughout the duration of my involvement with ASA as a volunteer member. Accordingly, ASA may obtain additional criminal background and/or driving record reports from a third party on an ongoing basis throughout my association with ASA without any further notice or additional warning. To this end, I hereby authorize without reservation any law enforcement agency, administrator, local, state or federal agency, information service bureau and/or the Social Security Administration to furnish any and all background information (including criminal history and/or driving records and not credit history) requested by the third party "consumer reporting agency", another outside organization acting on behalf of ASA, and/or ASA itself. I agree that a facsimile ("fax") or photographic copy of this Authorization and Instruction shall be as valid as the original.

**Include a Legible Photo Copy of your Driver's License Attached to this document.**

Printed Name – As it appears on DL

Social Security Number

Signature

Driver's License # & State

Email

Phone Number with area code

Date

Date of Birth