



Whitemarsh Little League Inc.

P.O. Box 99

Lafayette Hill, PA 19444

TO: All Whitemarsh Little League Volunteers
FROM: Michael J. Fink, President
DATE: December 19, 2007
RE: ANNUAL VOLUNTEER APPLICATION AND BACKGROUND CHECK

Volunteers,

The time has approached once again to prepare for the upcoming 2008 baseball season.

Attached to this memorandum is a copy of the Whitemarsh Little League Volunteer application. This form must be completed and returned to me **not later than Friday, January 25, 2008**. All forms must be processed, background checks completed, and Managers and Coaches selected, prior to February's player evaluation.

Please take the time to read and understand the enclosed material. Additional information is available on line at www.littleleague.org.

Please mail or deliver the completed forms to:
Whitemarsh Little League
P.O. Box 99
Lafayette Hill, PA 19444

Do not forget to enclose a copy of your driver's license or other form of valid government issued photo identification. Your application cannot be processed without valid photo identification.

Although Little League baseball, Inc (LLBI) recommends that individual volunteers personally pay for the conduct of the background checks, WLL has elected to incorporate the cost of the checks into our operating expenses.

If you have any questions or concerns, please call me at 610.941.0170 or email me at mmme@comcast.net.

Sincerely,

Michael J. Fink

Michael J. Fink
President, WLL

Attachments: Volunteer Application Form

Revised Little League® Volunteer Application for 2008

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



Michael J. Fink
President

Revised Little League ® Volunteer Application for 2008

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.**

(Please type or print legibly)

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Home phone _____ Business phone _____

Email Address _____

Date of Birth _____ Age _____

Occupation _____ Social Security # _____

Employer _____

Address _____

Special professional training, skills, hobbies: _____

Community affiliations (Clubs, Service organization, etc.): _____

Previous volunteer experience (including baseball/softball and year): _____

Do you have children in the program? Yes ____ No ____

If yes, at what level? _____

Special Certification (i.e. CPR, Medical, etc): _____

Do you have a valid driver license: Yes ____ No ____

Driver license # _____ State _____

Have you ever been convicted of or plead to any crimes (s): Yes ____ No ____

If yes, describe 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 __ Manager/Head Coach __ (age group) __ 1st Asst Coach __ (age group) __

2nd Assist Coach __ (age group) __ Umpire __ Field Maintenance __ Scorekeeper __

Parents' Auxiliary __ Other __ (Explain) _____

Revised Little League ® Volunteer Application for 2008

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

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

Name	Phone
_____	_____
_____	_____
_____	_____

As a condition of volunteering, I give Whitemarsh Little League permission to conduct a background check on me, which may include a review of sex offender's 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 Whitemarsh 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 _____

Applicant name (please type or print) _____

Note: Whitemarsh 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:

Application received by (league officer) _____

Date application received _____

Background check completed by (league officer) _____

On (date) _____

System (s) used for background check (minimum of one must be checked):

Sex Offender Registry ___ Criminal History Records ___

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