



Cypress Girls Softball Volunteer Application

Division: _____ Team #: _____ Player Reg #: _____

This application will be used by CGSL Board of Directors as an aide to selecting Managers, Coaches, and all other personnel for all positions within the league. The Board of Directors requires the use of a form as it provides the best method and control by which the best available personnel can be appointed each year. It is the responsibility of the Board of Directors of this league to carefully choose the best adult leadership for positions in the league to benefit all registered players.

Name: _____ Male: _____ Female: _____

Address: _____ City: _____ Zip: _____

Phone Number: Hm _____ Wk _____ Cell _____

E-Mail Address': _____

Have you ever been affiliated with any other girls softball program? _____ Please give details _____

Have you ever been suspended from any youth program? _____ If so, give details _____

Can you maintain an even temperament during a moment of trial? Yes _____ No _____

Have you ever been convicted of a felony or misdemeanor crime involving moral turpitude (optional) Yes _____ No _____ If Yes,

Please explain: _____

All approved applications **will be** run through the ASA SO CAL background clearance. This clearance will provide our league with information concerning crimes of moral turpitude. All information will be provided to ONLY ONE current member of the Board of Directors, and will remain confidential.

Please list you working hours: Day: _____ Night: _____

Position Desired: Please check one or more of the following positions in which you are willing to assist the league.

Manager: _____ Coach: _____ Assistant Coach: _____ Team Mom: _____

If appointed, you must attend all mandatory scheduled meetings and events of this softball league during this current season. All managers and coaches must also attend a mandatory MANAGERS and COACHES CLINIC.

Please sign and date the following statement: I will comply with the Administrative Rules and Regulations of CGSL for the current season. I understand that my application will be not considered for approval without the So Cal ASA background clearance form and the \$20.00 insurance/background clearance fee. I also understand that this appointment is for the current season unless revoked sooner by the Board of Directors for any action deemed detrimental to the welfare of this organization.

Signature: _____ Date: _____

For Board Use:

Background Check w/ SS _____ Copy of Drivers License _____ Clearance/Insurance Fee _____

This application was reviewed by the CGSL Board of Directors at a meeting held _____

Action Taken: Accepted _____ Rejected _____ Postponed _____

League

Secretary _____ President _____