



2021 REFEREE VOLUNTEER APPLICATION

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Additional Information:

I have a child or sibling playing this season? Yes No Name/s: _____

Do you have any criminal history or law violation other than traffic? Please explain:

When would you like to volunteer? (Please Circle ones you are available for)

Mondays 5-8:30
 Thursdays 5-8:30
 Friday 5-8:30

Tell us about your volleyball experience

PRINT Last Name First Name Middle			Date of Application
Maiden name/alias	Gender	D.O.B. (mm/dd/yyyy)	
Street Address			Primary Phone
City State Zip Code			Alternate Phone
Email Address			Business Phone
Emergency Contact Name			Emergency Contact Phone Number
Name of Current Employer or School			Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any medical conditions or allergies (if yes please list below) <input type="checkbox"/> Yes <input type="checkbox"/> No			

Employer: _____ Would your employer be interested in sponsoring a team?
 Yes No

My signature below certifies:

Have you **been arrested for any crime** within the past three (3) years? Yes No

• All statements and information submitted on this application are true and correct. • I understand that authorization to volunteer may be contingent upon receipt of satisfactory results from background check(s). I also release such agencies from liability for any information that they may provide.

 APPLICANT SIGNATURE _____
DATE



2021 UMPIRE VOLUNTEER APPLICATION

For Staff Use Only (Check and initial)

- ID Copy ____ W S P B background ____ Sterling Volunteers ____
- Added into Vision database ____ S hred C onfidential Info Initial: _____

The Boys & Girls Clubs of Whatcom County appreciates the gifts and talents that you are willing to share with the youth of Whatcom County! Providing safe and secure programs for our youths is of utmost importance to us. The information gathered in this application is designed to help us provide the highest quality programs for the people of our community.

PLEASE READ AND INITIAL EACH FOLLOWING STATEMENT

I declare that all statements contained in this application are true and that any misrepresentation or omission is cause for rejection of my application, or dismissal from the Clubs. _____

I hereby authorize this organization to conduct personal and professional background checks for the purposes of my application. This organization may contact any references, past and current employers, church, youth organizations, agencies where volunteer service has been completed, and any individual or organization that might be relevant to my desired position. I hereby release all persons listed in my application from any and all liability for damages that might occur during the Club's contact with the individuals for purposes of employment or volunteer services screening. _____

I also hereby give complete permission for the Clubs to conduct a criminal background check, arrest records check, abuse registry check, and driving record check for the purposes of my employment or volunteer services. I authorize investigations of all statements contained in the application. _____

I waive all rights to inspect information provided about me by the persons previously mentioned. I have also read and understood the information stated above in this release and am signing below of my own free will. _____

I understand that this organization has a ZERO TOLERANCE FOR ABUSE and takes all allegations of abuse seriously. I further understand that the Clubs cooperates fully with the authorities to investigate all cases of alleged abuse. Abuse of minors is grounds for immediate dismissal and possible criminal charges. _____

I declare that I have not perpetrated physical, sexual, emotional abuse or neglect against a minor or a vulnerable adult, and that I have never been accused of these acts. _____

I understand that I can withdraw from the application process at any time. _____

I understand and agree that false statements and/or omissions regarding past conduct and/or present situation may be grounds for denial of the application to provide employment and/or volunteer services, and that refusal to inform the Clubs of the contents of a sealed criminal record will result in the automatic denial of the application. _____

My signature indicates that I have read and understand the above. **Do not sign until you have read and initialed the above statements.**

Signature: _____ Date: _____

Parent's Signature: _____ Date: _____



2021 UMPIRE VOLUNTEER APPLICATION

Printed Name: _____

Legal Name: _____

First Middle Last

Date of Birth: _____ WA State Driver's License Number: _____

I authorize the Boys & Girls Clubs of Whatcom County to use the information provided for the purposes of approving/rejecting my volunteer application.

Signature: _____ Date: _____

Parent's Signature: _____ Date: _____

Printed Name: _____

Please attach a copy of your driver's license or state ID

Once your background has been cleared through the WSPWatch system you will receive an invitation from Sterling Volunteers to complete the second step in the process. During this step you will be required to add your social security number into a secured system that the Boys & Girls Clubs of Whatcom County has no access to.

Forward completed forms to : AthleticDepartment@whatcomclubs.org.