## **Volunteer Application**

This form is to be used for an individual with the intent to volunteer within the SAY Soccer organization.

## Directions:

Date\_\_\_

- 1. Print Form.
- Complete (including signature)
   Return to your SAVA.

				Social Security Number:
Name:				Social Security Number:
Last	First	Middle initial	(other names used)	
	Street			
Present Address:	City:			
	State:			Zip:
Date of Birth:			Male Female	
Race		Height Eye cold		color
PERSONAL HISTORY Have you ever been found guilty by a court or other tribunal to have committed a violent act against another person, engaged in any misconduct involving a juvenile OR been convicted of a crime except for a minor traffic violation?				
YES NO				
If you answered "Yes" to the above question, please provide the details of each conviction or pending conviction below, including DATE (month/year), LOCATION (city, county, state), and NATURE of ALL convictions or pending convictions. Failure to list ALL convictions or pending convictions may be considered a falsification of this application and result in the withdrawal of an offer off the volunteer position. It is not acceptable to substitute "will discuss" for this information.				
Conviction (date, location and nature):				
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Conviction (date, location and nature):				
Soccer Association for Youth (SAY), at its discretion, may use the above information to conduct a criminal background check.				
As an applicant for a SAY volunteer position, I hereby affirm the truthfulness of the representations I have made, including the information provided in response to the questions regarding my criminal history. Iauthorize SAY to verify the above information and waive any right to confidentiality with respect to the information requested. If requested by SAY, I will submit my fingerprints for that purpose.				
Signature				