



VOLUNTEER APPLICATION / INSURANCE REQUEST

All information MUST BE COMPLETED in order to be considered as a West Grove Girls Softball volunteer - NO EXCEPTIONS!!

Volunteer's Name: _____ Middle Initial: _____

Address: _____

City: _____ State: _____ Zipcode: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Date of Birth: _____ Driver's License #: _____

Please check all that you will be applying to volunteer for:

- Manager
 Head Coach
 Assistant Coach
 Team Mom
 Board Member - Position _____

Have you EVER been convicted of a felony? Select one: Yes No

If yes, please explain on the BACK of this application.

I understand that West Grove Girls Softball League Board of Directors reserves the right to NOT approve volunteers in an effort to protect members of the West Grove Girls Softball League (WGGSL). The WGGSL does not discriminate and offers equal opportunity for all, but we do reserve the right to approve/disapprove volunteers based upon experience and any previous actions deemed detrimental to the well being of its players, general members, umpires, volunteers and Board of Directors.

Volunteer Signature

Date

**WGGSL CODE OF ETHICS AND USA SOFTBALL VOLUNTEER FORM
MUST BE SIGNED AND INCLUDED WITH THIS APPLICATION,
ALONG WITH A COPY OF YOUR DRIVER'S LICENSE.
SUBMIT ALL DOCUMENTATION TO YOUR TEAM MANAGER.**