

## JUNIOR VOLUNTEER APPLICATION/INSURANCE REQUEST

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

First Name	Middle Name	Last Name	
Street Address			
City	State	Zip	
Home Phone	Cell Phor	Cell Phone	
Email			
DOB	Driver's License/ID:		
to NOT approve v Softball League ( opportunity for all, upon experience a	rolunteers in an effort to p (WGGSL). The WGGSL do but we do reserve the right	ague Board of Directors reserves the right rotect members of the West Grove Girl des not discriminate and offers equal to approve/disapprove volunteers based emed detrimental to the well-being of it its and Board of Directors.	
Volunteer Signatur	·e	 Date	

SUBMIT THIS FORM TO YOUR TEAM MANAGER OR PLAYER AGENT