



Official 2022 Salinas Salad Bowl Bobby Sox Softball  
 Adult Leader Registration Form  
 THE SALINAS BOBBY SOX LEAGUE



National Adult Registration/Insurance/Background Fee - \$20.00  
 This form is to be completed by the Registrant

The Federal Government requires all Nonprofit Youth Organizations to conduct a background verification of every Adult Volunteer before they can be permitted to participate with children. This original form must be on file at Salinas Bobby Sox Softball. The non-refundable registration fee of \$20.00 covers Staff Registration, Accident/Medical and Liability Insurances and Background Verification. Expires 12-31-22.

_____	_____	_____
Print Your Last Name	Print Your Full First Name	Middle Initial
_____	_____	_____
Print Your Residential Address	City	ST      Zip Code
(      )	(      )	
_____	_____	
Home Phone	Work/Cellular Phone <small>(Circle One)</small>	
(      )		
_____	_____	
Fax Number	E-Mail Address	
_____	_____	
Date of Birth	Last four (4) Digits of Social Security Number	
<input type="checkbox"/> ID CHECKED BY BOARD _____ (Drivers License or State ID)		UNIFORM SIZE: _____
Daughter's Name(s): _____		

VOLUNTEER POSITION APPLYING FOR: (CHECK ONE):  FEMALE MANAGER  FEMALE CHAPERONE  COACH  SCOREKEEPER

Have you ever been suspended from any other Youth Program?  No  Yes If Yes, Please Explain Below:

\_\_\_\_\_

Have you ever been convicted of a Felony?  No  Yes If Yes, Please Explain Below:

\_\_\_\_\_

Are you registered for any sexual offense?  No  Yes If Yes, Please Explain Below:

\_\_\_\_\_

I promise that at all times, I will be an exceptional role model for all of the girls. I will always display the finest examples of Sportsmanship and Leadership. I will control my emotions for the benefit of the girls and the team I take guardianship of. I realize that I may be removed from my position and from future participation for improper conduct. I understand that I am subject to a Background Investigation (CPC #11105.3) to determine my qualification for this sensitive volunteer position where youth are involved. I realize that it is the right of Salinas Bobby Sox Softball to deny this application or terminate it at will.

I understand Civil Law and Salinas Bobby Sox Softball Rules establish that I am prohibited from the use of tobacco, alcohol, illegal drugs, the use of profane language or obscene gestures where children are gathered. With my signature, I give my oath and my pledge an resolute dedication to the girls of this Salinas Bobby Sox League.

_____ Registration # <small>(To be completed by League Board)</small>	_____ Your Signature	_____ Date
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