

Bomb Squad Baseball Volunteer Registration Form

Volunteer Information:

Name_____

Address_____

Gender M or F Phone_____

Email_____

Team Level Interest In

10U

11U

12U

13U

14U

15U

16U

Do you have experience Coaching Youth Sports: Yes No

If Yes, number of years_____

Have you ever been removed, suspended or asked to resign from a Coaching Position: Yes No

If Yes, please attach a written attestation describing the circumstances.

Have you ever been convicted of a background check crime: Yes No

*defined as child abuse, murder, manslaughter, felony assault
or any assault involving a minor*

I certify the information contained on the Authorization/Release is true and accurate. I acknowledge that I may be precluded from Coaching due to false, omitted or fraudulent information.

Volunteer Signature

Date