

Miami-Dade/Broward Super Peewee League 2025 Volunteer Application

Complete BOTH Pages

Please Note: A copy of a valid government-issued photo identification must be attached to this application.

PLEASE PRINT

Legal Name: _____ Date: _____

Prior /Meiden Name or Aliases: _____

Address: _____

Telephone: _____ Email: _____

City: _____ State: _____ Zip: _____

Mailing Address (if different): _____

Previous states resided in the past 5 Year: _____

Date of Birth: _____

(mm /dd / yyyy)

Social Security Number: _____ Occupation: _____

Employer: _____ Address: _____

Do you have a valid driver's license? Yes: ____ No ____ Driver's License Number: _____

Special professional training, skills, hobbies: _____

Community affiliations (Clubs, Service Organizations, etc.): _____

Pervious/current volunteer experience (e.g. baseball/softball, basketball and number of years): _____

Special Certifications (i.e. CPR, Medical, etc.): _____

Have you ever been charged with or convicted of a felony? Yes ____ No ____ If yes provide your current legal status (parole, etc.) _____

Have you ever been convicted of any crime involving or against a minor? Yes ____ No ____

Have you ever plead guilty to or been convicted of or involved with any other type of crime? Yes ____ No ____

Have you ever been refused participation in any other youth program? Yes ____ No ____

If yes to any of the above questions, please explain: _____

In which of the following would you like to participate? ("X" one)

Commissioner ____ Head Coach: ____ Assist Coach: ____ Team Parent: ____

Association Name: _____

Privacy Policy: Your privacy is important to us. MDBSPL does not sell or release contact information to any non-affiliated organization. However, Miami-Dade/Broward Super Peewee and its partners may contact you with essential program information as well as special offers and promotions. Please be advised that partners are not permitted to retain your information for non-Miami-Dade/Broward Super Peewee use unless you specifically grant them permission. Please contact the MDBSPL President in writing for opt out information.

Three Reference (cannot be a relative):

Name:

Nature of Relationship:

Phone Number:

I hereby swear and attest that all information provided on this application is true and complete to the fullest extent of my knowledge. If I am accepted as a volunteer, Miami-Dade/Broward Super Peewee my end the relationship immediately if I have made any false statements or material misrepresentations, written or verbal. As a condition of volunteering, I hereby grant permission to Miami-Dade/Broward Super Peewee to conduct a background check on me, which may include a review of database records including but not limited to sex offender registries, child abuse and criminal history records in compliances with Miami-Dade/Broward Super Peewee's child protection policy. I understand and agree that, if appointed, my position is condition upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the Miami-Dade/Broward Super Peewee League, Incorporated, the officers, employees and volunteers thereof, and or any other person or organization that may provide such information.

I also understand that, regardless of previous appointments, Miami-Dade/Broward Super Peewee is not obligated to appoint me to a volunteer position. I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Executive Board for any and all violations of Miami-Dade/Broward Super Peewee policies or principles. Furthermore, I hereby attest that all contact information provided herein is up to date and I hereby grant Miami-Dade/Broward Super Peewee League and partners permission to utilize such contact information for communications and promotions during my tenure as a volunteer.

Binding Arbitration Policy:

If appointed, I hereby understand and agree that any and all civil disputes by and between myself, Miami-Dade/Broward Super Peewee League and any and all affiliated parties will be subject to binding arbitration in the locale of the Miami-Dade/Broward Super Peewee League in accordance with the Miami law under the guidelines and rules of the American Arbitration Association. I hereby agree that this binding arbitration shall be in lieu of any litigation by and between myself, Miami-Dade/Broward Super Peewee and any and all affiliated parties. If any portion of this application shall be deemed unenforceable or invalid, this arbitration agreement shall still remain in full force and effect.

Applicant Name (Please Print)

Applicant Signature

Date

NOTE: Miami-Dade/Broward Super Peewee League will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

For Local Use Only. Below please print the legal name of the individual who performed the background check on the applicant and name of the local organization.

Background check completed by League officer _____ or Completed by _____ Date Completed _____

System(S) used for background check (minimum of one must have "x"):

Online Multistate Database _____ State/Federal Criminal History Records _____ FEDERAL Sex Offender Registry _____
Other (please explain) _____

****NOTE:** A State Sex Offender Registry check alone is NOT sufficient to comply with Article 21 and MUST be supplemented by one or more of the above.

LEAGUE: You must maintain copies of background check results at league level for the duration of the volunteer's service.