

La Grange Optimist Club Volunteer Application

A COPY OF VALID GOVERNMENT ISSUED PHOTO IDENTIFICATION MUST BE ATTACHED TO COMPLETE THIS APPLICATION

Name _____ Date _____
Address _____
City _____ State _____ Zip _____
Home Phone _____ Business Phone _____
E-mail Address _____
Date of Birth _____
Occupation _____
Employer _____
Employer Address _____
Special Professional Training, Skills, Hobbies: _____

Community Affiliations (Clubs, Service Organizations, etc.) _____

Previous Volunteer Experience: _____

Do you have children in the program? Yes _____ No _____
If yes, list full name and what grade? _____
Special Certification (I.e. CPR, Medical, etc.): _____
Do you have a valid Driver's License: Yes _____ No _____
Driver's License #: _____ State _____
Have you ever been convicted of or pled guilty to any crime(s): Yes _____ No _____
If yes, describe each in full: _____

Have you ever been refused participation in any other youth programs? Yes _____ No _____
If yes, explain: _____

In which of the following would you like to participate? (Check one or more.)

Coach _____ Assistant Coach _____ Team Parent _____
Referee _____ Division Leader _____

Please list three (3) references, at least one of which has knowledge of your participation as a volunteer in a youth program:

Name	Phone
_____	_____
_____	_____
_____	_____

Applicant Signature: _____ Date: _____

Applicant Name (please print or type) _____