



SAY Volunteer Application

Please PRINT all information. Fields identified with an (*) are required.

Applicant Information

*Last Name:		*First Name:		MI:
*Street Address: ⁽¹⁾			*Years at Current Address:	
*City:		*State:	*ZIP Code:	
*Primary Phone:	Secondary Phone:		Alt Phone:	
*Date of Birth:		Email:		
*Driver License #:		*State Issued:	*Expiration Date:	

⁽¹⁾If residence at above address for less than five years, please indicate prior address

Street Address:		Years at prior Address:
City:	State:	ZIP Code:

Personal History Information

The following must be completed by all volunteers, new and returning.

Have you ever been found guilty by a court or other tribunal to have committed a violent act against another person, engaged in any misconduct involving a juvenile OR been convicted of a crime except for a minor traffic violation?

YES NO

Returning Volunteer – Check one: My personal history HAS / HAS NOT changed since last year.

Notice of Consent to Criminal Background Check & Statement of Affirmation

Soccer Association for Youth (SAY), at its discretion, may use the above information to conduct a criminal background check regardless of the response on "Personal History."

As an applicant for a SAY volunteer position, I hereby affirm the truthfulness of the representations I have made, including the information provided in response to the questions regarding my criminal history. I authorize SAY to verify the above information and waive any right to confidentiality with respect to the information requested. If requested by SAY, I will submit my fingerprints for that purpose.

Signature of applicant Date

SAY AREA

Must be signed if a "YES" response in Personal History Information.

Signature of Area Volunteer Administrator Date