

# Walpole Youth Baseball Foundation Volunteer Application 2025

Use extra paper to complete if additional space is required

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_ Date of Birth \_\_\_\_\_

Driver's License \_\_\_\_\_ State \_\_\_\_\_

Occupation \_\_\_\_\_

Employer \_\_\_\_\_

Address \_\_\_\_\_

Special professional training, skills, & hobbies: \_\_\_\_\_

Special Certification (i.e., CPR, Medical, etc.) \_\_\_\_\_

Baseball experience (type and years) \_\_\_\_\_

Do you have children in the program? \_\_\_\_\_

Have you even been convicted of a felony offense or of any crime that requires you to register as a sex offender? \_\_\_\_\_

If yes, describe in full \_\_\_\_\_

Have you ever been refused participation in any other youth programs? \_\_\_\_\_

If yes, explain \_\_\_\_\_

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

Coach \_\_\_\_\_ Field Maintenance \_\_\_\_\_ Umpire \_\_\_\_\_

\*\*References: Name \_\_\_\_\_ Phone Number \_\_\_\_\_

As a condition for volunteering, I give permission for the Walpole Youth Baseball Foundation (WYBF) to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the Foundation receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the WYBF, the trustees, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, WYBF is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the Chairman and removal by the Board of Trustees for violation of WYBF policies and principles.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant Name (please print or type) \_\_\_\_\_

*Note: WYBF will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.*

## Walpole Youth Baseball Foundation Use Only:

Background check complete by league officer \_\_\_\_\_  
on \_\_\_\_\_

System(s) used for background check (minimum of one must be checked):

Sex Offender Registry \_\_\_\_\_ Criminal History Records \_\_\_\_\_

*Note: Only attach to this application a copy of background check report that reveal convictions of this applicant.*