



# HUDSON VALLEY ADMIRALS

## VOLUNTEER APPLICATION



Please indicate the volunteer position you are interested in. Check all that apply.  
Volunteers are required to attend monthly general body meetings.

Application Date: \_\_\_\_\_

Specify Committee Position: \_\_\_\_\_

- Football Head Coach   
  Football Assistant Coach   
  Cheer Head Coach   
  Cheer Assistant Coach   
  Team Parent  
 Executive Committee   
  Committee Chair   
  Committee Member   
  Board Member

Shirt Size: \_\_\_\_\_  
 Full Legal Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender:  M  F  
 Social Security #: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
 Driver's License #: \_\_\_\_\_ State Issued: \_\_\_\_\_ Expires: \_\_\_\_\_  
 Current Full Address: \_\_\_\_\_ Length of time: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Experience:** Please provide any relevant experience for the position you are applying.

Have you ever been convicted of a felony or misdemeanor?  Yes  No  
 Are you currently on probation or court supervision?  Yes  No  
 Have you ever failed to be re-employed, been fired, or been asked to resign from any position involving the supervision or care of minors?  Yes  No

### Coaching Positions:

- Do you agree to coach/teach/mentor according to the guidelines set forth by the Head Coach and/or Commissioner?  Yes  No  
 Do you agree to attend all HVA meetings/trainings and/or TYFC trainings provided within the calendar year?  Yes  No  
 Are you CPR/First Aid/Concussion certified?  Yes  No

*If yes, please attach a copy of your certification*

**Coaching Positions require the completion of on-line training courses and CPR/First Aid/Concussion certifications.  
A list of required courses will be provided prior to the start of the season.**

I hereby certify that the facts set forth in this volunteer application are true and accurate to the best of my knowledge. I understand that if I falsify statements on this application, I will not be considered as a volunteer. I hereby authorize Hudson Valley Admirals Youth Football and Cheer or its representatives to conduct an investigation into my background history to verify the information I provided. I also understand an application does not guarantee selection into the volunteer position. If selected, I agree to abide by all rules, policies, and by-laws of the Hudson Valley Admirals and Taconic Youth Football League.

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_