

**LOWER NAZARETH TOWNSHIP  
CERTIFIED SPORTS PROGRAM VOLUNTEER APPLICATION**

*\*\* Do not use forms from past years. Use extra paper to complete if additional space is required. \*\**

**A copy of valid government issued photo identification must be attached to complete this application.**

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

Address \_\_\_\_\_

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

How Long At This Address? \_\_\_\_\_

Date Moved into Area \_\_\_\_\_ Home Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Sport Volunteering For:     Baseball     Basketball     Cheering     Football     Soccer

Previous volunteer experience (including baseball/softball, football, soccer, basketball, etc. and year):  
\_\_\_\_\_

Do you have children in the program? Yes  No

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

Have you ever been convicted of or plead 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: \_\_\_\_\_

As a condition of volunteering, I agree to submit the results of a certified background check, which may include a review of sex offender registries, child abuse and criminal history records, to the Director of the Sports Program and the Township. I understand that, if appointed, my position is conditional upon meeting the conditions of the Lower Nazareth Background Check Policy. I hereby release and agree to hold harmless from liability the Lower Nazareth Township Recreation Association, Lower Nazareth Township Board of Supervisors, the officers, employees and volunteers thereof, or any other person or organization that may receive such information. I also understand that, regardless of previous appointments, the Sports Programs of the Township, covered by this policy, are 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 or disqualification by the Township or the Sports Program Director for violation of this policy.

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

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

*NOTE: The Township or the Lower Nazareth Township Recreation Association will not discriminate against any person on the basis of race, creed, color, national origin, martial status, gender, sexual orientation or disability.*

**Township Use Only:**

Background check verified by Sports Program Director \_\_\_\_\_

On \_\_\_\_\_

Background check verified by Township Official or their Designee \_\_\_\_\_

On \_\_\_\_\_