



Corona Girls Softball Association

Winterball Manager Application 2009
If you have already received an ASA card for 2009 you only need to fill out the volunteer application.

If you have not registered with ASA for 2009:

- 1. Fill out and complete the volunteer form.**
- 2. Complete the background form.**
Do not leave any information blank it will be rejected.
- 3. Provide a copy of your driver's license. It is required by ASA. If not provided it will be rejected.**
- 4. Payment of \$13.00 to CGSA that will be paid in turn to ASA for the background check.**



Corona Girls Softball Association

Volunteer Application Form Spring 2010

Position applied for: Manager Coach Team Parent

Name: Last _____ First _____ Middle Initial _____

Address: _____ City: _____ Zip: _____

Home Phone: () _____ Cell: () _____ Work: () _____

Email Address: _____

Daughter(s) Name: _____ Division(s): _____

- Yes* *No* Have you previously held a Manager / Coach position with CGSA?
If yes, when and how long? _____
- Yes* *No* Have you previously held a position with other youth organizations?
If yes, where and when? _____
- Yes* *No* Have you ever been suspended from a youth organization.
If yes, please provide details: _____
- Yes* *No* Have you ever been registered for any offense under 290 C.P.C. (Sex Crimes)?
- Yes* *No* Have you ever been convicted of any "drug crimes" or "crimes of violence"?
- Yes* *No* Do you plan to manage or coach with another individual? If yes, fill in below.
*Name: _____ Daughter: _____

Please read carefully and initial the following statements:

- _____ I hereby irrevocably consent to and authorize the reproduction of any and all photographs taken by any photo medium, including videotape, for normal program purposes for the current year and in association with CGSA.
- _____ I will comply with the Administrative Rules and Regulations of CGSA for the current year. I understand that this appointment is for the duration of the current Spring or Winterball season, unless revoked by the CGSA Board. I understand that ASA requires that all volunteers for the league MUST submit to a background check and will submit an authorization and pay any fees associated with the background check to determine my suitability for this sensitive community position. I hereby approve of such action (C.P.C. #11052-2).
- _____ I will attend the MANDATORY managers / coaches meetings. I understand & take responsibility for knowing the CGSA rules, regulations and support, whole heartedly the CGSA Mission Statement.
- _____ I will be a positive role model to all players of the Corona Girls Softball Association.

Signature: _____ Date: _____

By signing this form, the individual certifies that all the above is true and correct.

\$13.00 Fee Received _____ Background Form Completed _____ Copy of D.L. _____

Action Taken: Approved Rejected

President's Signature _____ Secretary's Signature _____
ASA



Corona Girls Softball Association

NOTICE OF BACKGROUND CHECK

[IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING BELOW]

The Amateur Softball Association (ASA) is a volunteer driven not-for-profit organization. One of ASA's objectives is to promote proper safeguards in accordance with the spirit of true sportsmanship and establish principles for ethical behavior in the sport of Softball. You have expressed an interest in becoming a member of ASA on a voluntary basis. Consistent with promoting wholesome and safe competition, ASA may perform criminal background and/or motor vehicle record (or "driving record") checks on you pursuant to your written instructions below. Accordingly, ASA may obtain reports on your criminal background and/or driving history from a "consumer reporting agency" called Comprehensive Information Services, Inc. (CIS), P.O. Box 79007, Pittsburgh, Pennsylvania 15216, customercare@cisonline.com, 800-452-8725. CIS's report may include information gathered from county, federal and/or statewide record searches, as guided by personal identifier information obtained through a Social Security Number trace. Note: Conducting a Social Security Trace does not access the subject's credit history nor affects the subject's credit score or credit rating.

Please note that by signing below you are authorizing and instructing ASA to immediately obtain criminal background and driving record reports from a third party (utilizing a Social Security Number trace) as ASA deems necessary and appropriate. Moreover, you are allowing and instructing ASA to obtain those reports from a third party on an ongoing basis without any additional notice for as long as you are a volunteer member of the ASA.

AUTHORIZATION AND INSTRUCTION

I acknowledge receipt of the NOTICE OF BACKGROUND CHECK and certify that I have read and understand that notice. I hereby authorize and instruct ASA to obtain criminal background and/or driving record reports from a third party (utilizing a Social Security Number trace) as ASA deems necessary and appropriate. This authorization and instruction will take immediate effect when I sign below, and will last throughout the duration of my involvement with ASA as a volunteer member. Accordingly, ASA may obtain additional criminal background and/or driving record reports from a third party on an ongoing basis throughout my association with ASA without any further notice or additional warning. To this end, I hereby authorize without reservation any law enforcement agency, administrator, local, state or federal agency, information service bureau and/or the Social Security Administration to furnish any and all background information (including criminal history and/or driving records and not credit history) requested by CIS, another outside organization acting on behalf of ASA, and/or ASA itself. I agree that a facsimile ("fax") or photographic copy of this Authorization and Instruction shall be as valid as the original.

Include a Legible Photo Copy of your Driver's License Attached to this document.

Printed Name _____ Social Security Number _____

Signature _____ Driver's License # & State _____

Date _____ Date of Birth _____

ASA

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