

# VOLUNTEER REGISTRATION FORM

Please complete the following information to volunteer at one of the activities listed below.

Player's Name: \_\_\_\_\_ Age group: \_\_\_\_\_

Volunteer's Name: \_\_\_\_\_

Email address: \_\_\_\_\_

Phone Number: (H) \_\_\_\_\_ Cell: \_\_\_\_\_

**Please circle at least one activity below.**

Fundraising/Fundraising committee

Field Painting/set-up & tear down of goals

Head Coach (complete RG-6 Form)

Assist. Coach (complete RG-6 Form)

U8 Concession Stand Coordinator

Concession Stand (U6-U8 Only)

U6, U7 or U8 Group Coordinator

Line Person for U9 and above

Camps or other special activities

## **Volunteer Waiver:**

I cannot volunteer for any of the above activities, please accept my \$25 donation in lieu of volunteering my services.

Signature: \_\_\_\_\_ Cash Received: \_\_\_\_\_ Check No.: \_\_\_\_\_