

YOUTH SPORT VOLUNTEER

624 College * Winfield, KS 67156 (620)221-2160 * Fax (620)221-7232

WINFIELD RECREATION

Name:		Date of Birth:						
Social Security Number:			Driver's Licen	State:				
Current Address	Street	apt. #	city		zip code			
	Street	арт. #	city	state	zip code			
Past Address: _	Street	apt.#	city	state	zip code			
Home Phone Number:			Cell Phone:	E-Mail:				
Present Employ	er:			Work Number:	Ext			
	Nan	ne of company						
	Add	ress Street		-				
	City	state	e zip	Describe Position:				
References: List	t two (2) refe	rences not relate	d.					
	(=) 1010							
Name		address phone number						
Name			address		phone number			
If yes, please exp	plain the detai	ils:		to a crime? and/or alcohol?If ye	s, please explain the details:			
Have you ever b	een ejected i	from a game as a	coach or a spectator?	Yesno				
List sports you	have coached	l:						
representations history. I author	s I have ma orize the W	ade, including th	ne information provid nrough a background	teer position, I hereby attest to led in response to the question of check, the above information	ns regarding my criminal			
			if any statement I ha erminated from my WI	ave made is found to be false, RC position.	I will be denied a WRC			
I will immediate volunteer.	ely advise t	he WRC office	if I am convicted of a	a crime (except for minor traffic	c offenses) while a WRC			
Signature			Printed No					