

Patterson Tigers Youth County Softball & Baseball

Board Member Application

Patterson Tigers Youth Softball and Baseball Program is a volunteer community based Non-Profit organization, which has been formed to help the children of our community learn the skills of Softball and Baseball. As a PTYSB Board Member, you will agree to represent the PTYSB programs, community and it's participants in the best possible way. You will agree to follow it By-Laws, rules and regulations and uphold its standards. You will be required to attend a minimum of 75% of the years Board Meetings, understanding that the Board meets a minimum of once per month and if there are pressing items that need to be addressed, a special meeting will be called. As a Board Member you will be responsible for a specific job duty and additional responsibilities may also be designated to you at the discretion of the Board, all of which you will be responsible of completing fully for the greater good of the program. You are also required to be a part of at least one committee per year and attend said committee meetings. All Board members are required to undergo a DOJ background check prior to acceptance.

Name:	Date of Birth:
First MI Last	
Drivers License#/ID#: State:	Exp. Date:
Address:	City:
Home Phone :() Cell	
Work Phone :() Email:	
Employer:	Occupation:
Do you have children in the program? Yes No	if yes, what level:
I would like to be considered by PTYSB Board in the following	capacity:
Please complete the following information to help us determine	your placement in the program;
List any special training, education, work, skills or hobbies:	
Special certificates (CPR, Coaching, Etc.):	
Previous volunteer experience:	
Community Affiliations (Clubs, Boards):	
Briefly describe your demeanor on and off the field:	
Goals and expectations for your role in the program:	
Have you ever been denied participation in any youth program	? Yes No
Have you ever been convicted of or plead guilty to any crime(s)? Yes No
Will this crime hinder your acceptance to our program?	Yes No
If yes, to any please explain:	
References 1 Name:	Phone:
References 2 Name:	Phone:
I certify that the above information is true and agree to all rules	, regulations and background checks.
Signed:	Date:
For Office use only: Approved Denie	d Date: