



Ripon Youth Baseball & Softball Volunteer Contract and Letter of Intent



Applicant's Name: _____

I understand and agree that my involvement as a Volunteer with Ripon Youth Baseball & Softball is performed under the following provisions:

1. I have never been convicted of a felony criminal offense, nor do I have any pending felony charges against me. If any misdemeanor criminal offenses, please list and provide an explanation.

2. I will familiarize myself with and adhere to the Ripon Youth Baseball & Softball Code of Ethics.
3. I have completed the letter of intent.
4. I will not be paid any salary nor receive any benefits for my services.
5. I will withdraw immediately from volunteering if I am unable or unwilling to follow the provisions herein.
6. I grant permission to the Ripon Police Department to complete a criminal background check at any time during the term of this agreement.

Letter of Intent

What role/position you are volunteering for, and what league(s) if applicable.

Date of service: From _____ To _____

I hereby affirm that all information in the Volunteer Contract is true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of information may result in termination of my volunteer Contract with the Ripon Youth Baseball & Softball.

Applicant's Signature _____ Date _____

RETURN this agreement to a RYBS Board Member or mail to: Ripon Youth Baseball & Softball
P.O. Box 492
Ripon, WI 54971

www.riponyouthbaseballsoftball.com

The sole purpose of this agreement is to insure the safety of our community's youth, and maintain the integrity of Ripon Youth Baseball & Softball.



**Ripon Youth Baseball & Softball
Authorization for Background Check**



I, the undersigned, hereby authorize a criminal background check with the results to be given to the Ripon Youth Baseball & Softball Board of Directors. I hold the Ripon Youth Baseball & Softball Board of Directors harmless in its search for background information, as well as any provider of such information.

Please print:

Complete Name: _____
(First Name) (Middle Name/Initial) (Last Name)

Maiden Name (if applicable) _____ Phone: _____

Address: _____

Date of Birth: ____/____/____ City/State of Birth: _____

AUTHORIZATION FOR CRIMINAL BACKGROUND CHECK

I, the undersigned, hereby authorize the Ripon Police Department to perform a criminal background check with the results to be given to the Ripon Youth Baseball & Softball Board of Directors. I hold the Ripon Youth Baseball & Softball Board of Directors harmless in its search for background information, as well as the provider of such information.

Applicant's Name: _____

Applicant's Signature: _____ Date: _____

To be completed by Ripon Police Department and Ripon Youth Baseball & Softball

Background Check Signature _____ Date _____

Board Representative Signature _____ Date _____

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