

## **NYRB** Umpire Application

Name:		Date:		
Address:		_City:	State:	
Home phone:	Work phone:	ork phone: Cell phone:		
Date of Birth:	Social Security	/#	<del></del>	
Employer:	Address:			
Position Volum	ateering for: Coach ( ) Umpire ( ) O	ther ( )		
Do you have c	hildren in the program? Yes ( ) No (	) What grade:		
DRIVING HI	STORY/CRIMINAL HISTORY			
( ) Yes ( ) No	Is your driver's license suspended or revoked in this or any other state?			
( ) Yes ( ) No	Have you ever been arrested for driving while intoxicated or under the influence of alcohol or any other substance?			
( ) Yes ( ) No	Have you ever been convicted of, pled guilty to, or pled no contest in any state to any of the following. If you check "yes" to any questions below, a detailed explanation will be required on the back of this form in order for you to be considered by the Board for a volunteer position.			
( ) Yes ( ) No	Murder, manslaughter, assault, kidnapping, felonious restraint, stalking, harassment, Interference with custody or any crime similar to these?			
( ) Yes ( ) No	Rape, sexual assault/abuse, sodomy, sexual misconduct, indecent exposure, bigamy, incest, criminal nonsupport, child abuse or molestation, endangering a child's welfare, unlawful child transactions, child trafficking, promoting/using a child in sexual performance or any crime similar?			
( ) Yes ( ) No	Prostitution, patronizing or promoting prostitution or any crime similar?			
( ) Yes ( ) No	Pornography, child pornography, furnishing pornographic material to minors, public display of explicit sexual material or any crime similar?			
( ) Yes ( ) No	Armed criminal action, possession, manufacture, transport, repair or sale of illegal weapons, unlawful use of a weapon, defacing a firearm, possession of a defaced firearm, unlawful transfer of weapons, possession of a concealable weapon, transfer of a concealable firearm or use or possession of a metal penetrating bullet during a crime?			
( ) Yes ( ) No	Manufacturing, possessing, selling, using, administrating, distributing or dispensing any controlled or counterfeit substance. Possessing, using or delivering drugs or paraphernalia. Planting, cultivating, growing, harvesting or promoting the sale of drugs or drug paraphernalia or any crime similar?			
Signature of Ap	plicant:	D	ate:	

UNDER penalty of law for making a false statement, I certify that the background information contained in this application is true. Failure to complete this form in its entirety may exclude you from consideration for a volunteer position. By my signature, I understand that a thorough background check may be conducted of both in state Missouri and out of state records, as appropriate. I hearby release and agree to hold harmless from liability the local officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that regardless of previous appointments, Nevada Youth Recreational Baseball is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for violations of the organizations policies or principles.