

## PO Box 12 Franklin, NH 03235

## 2020 Franklin Girls Softball Volunteer Application

Name:	S License #: USA Registration #:					
Driver's L						
Address:				Phone #:		_
				Email:		
	City	State	Zip Code			•
Are you (	check all that ap	<b>oply):</b> Guardian	Sponsor		Other	
If Daront	Guardian, name		Sp011301		Conci	
	r, name of busin					
•	be specific:	<b>C33.</b>				
ii Otilei, i	ве зрести.					—
How are	_		eck all that apply):		1	
	Dugout	Assistance	Field Prep		Concession Stand	
What Age	e Group do vou	nrefer to ass	ist with (check all th	at apply):		
6U (4-6		100 (8			12-14) 16U (14-16) Any Age Level	
	,,		2,	,	,	
Name of C	Coach/Team (if you	ມ have prefere	nce):			
season releas	se or permanent rel	ease. By signing	g below, I agree to adher	e to the league	league Code of Conduct. Severity of the issue may resu Code of Conduct. I understand that if I have any quest o understand that I will be held accountable for my acti	ions
					nteer position with Franklin Girls Softball this season. I o register with USA Softball, who will perform a backgro	
			League Code of Cor	nduct for Volun	teers	
		. 191 1 1	-			
			navior at all league sancti or throwing equipment.	oned events. St	uch behavior included, but is not limited to, is profanity	',
				stand that all de	ecisions made by an umpire shall be accepted as final a	nd
			umpires regarding a deci			
		_		_	d amount of time played. I understand that there are	10
_			ough coaches will do the		· -	
	_		ractices scheduled and if attend practices may res		flict arises I will notify the coach as soon as it has been	
			ractices on time and who			
	-				out permission from a coach.	
➤ I ur	nderstand that no o	ne shall enter th	ne dugout/designated tea	am area or field	without permission from a coach.	
Signature:	·					
_						
Date:						