

Indoor Soccer Volunteer Form

			Male 🛚	Female 2
Name				
Address				
City, State, Zip				
Work Place/School				
Home Phone				
Work Phone				
Cell Phone				
E-mail				
I am voluntee	ring to serve as a coach or assistant	coach		
Mites	Division (6&7 years old)	Juniors Division (8&9 years old)		
Boys	Intermediates (10-13 years old)	Girls Intermediates (10-13 years old)		
	Seniors Division	(14 to 18 years old)		
I am asking to	work as a referee in the program			
	=	clinic and must pass the program's Indoor		
Soccer	Referee Exam. Clinic dates and test	dates will be announced in early December.		
I give permission to th	e Boys & Girls Club of the Lower Nau	gatuck Valley to conduct a background chec	ck on me	
Birth Date				
Social Security #				
Signature				
Date				

All information is required. Please write clearly. If we cannot read your information, it will delay processing.

Mail completed form to:
Boys & Girls Club Soccer, c/o Marvin Miller, 193 Shagbark Drive, Derby CT 06418