Mt. Juliet League Umpire Association
Application

A copy of valid government issued photo ID must be attached to complete application.

Name_____ Date_____

Address_____

City_____ State_____ Zip_____

Home#_____ Work#_____ Cell#_____

Email Address_____

Date of Birth_____ SSN_____

Occupation/Employer:_____

Previous volunteer experience:_____

Number of years umpiring:_____

Number of years umpiring for MJ League:_____

Do you have children in the program?_____ If yes, list full name and playing level_____

Special Certification (i.e. CPR, Medical, etc.)_____

Do you have a valid driver's license?_____ State_____

DL#_____ Expiration Date_____

Have you ever been convicted of or plead guilty to any crime(s)?_____

If yes, describe each in full_____

_____

Have you ever been refused participation in any other youth programs?_____

If yes, please explain_____

_____

Insurance Information:

Policy Holder's Name:_____

Employer:_____

Insurance Company:_____

Policy/Group:_____

Please list three references:

Name_____ Phone_____

Name_____ Phone_____

Name_____ Phone_____

As a condition of umpiring, I give permission for the Little League organization to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Baseball, Inc., the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that, regardless of previous appointments, Little League is not obligate to appoint me to an umpire 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 violation of Little League policies or principles.

Signature_____ Date_____

Applicant Name (please print)_____

<u>Note:</u> The local Little League and Little League Baseball, Inc. will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation, or disability.

Local League Use Only:

Background check completed on:_____

By:_____

System used for background check:

☐ Sex Offender Registry ☐ Criminal History Record ☐ Choicepoint