



Chili Soccer Association Volunteer/Board Position Application

Date _____

Name _____

Address _____ City/Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

1. Desired Volunteer Position

1. _____
2. _____
3. _____

2. Previous employment/experience in the desired area

3. Education or training obtained in the desired area

4. Computer knowledge/ skills

5. Participation / Experience in soccer

6. Have you coached in this sport? Y____ N____
 If so, which club/league _____

6. Are you risk management approved? Y____ N____

6. References

Name	Email Address	Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

The Board will review applications at the meeting following its receipt. Applicants will be asked to attend a Board meeting as part of the application process.

Please send to or email Chili Soccer Association, Attn: Secretary, PO Box 109, North Chili, NY 14514
secretary@chilisoccer.org