

LODI JR FLAMES - Board Member Application

Year Applying for: _____ Personal History:

Name: _____
 Home Address: _____
 City: _____ State: _____ Zip: _____
 Hm: Phone: _____ Wk: Phone: _____
 E-Mail: _____
 SSN: _____ Drivers License: _____ Issuing State: _____

Position Applying for: (Check up to 3 and label in order of preference with 1 being preferred position)

- | | | |
|---|---|---|
| <input type="checkbox"/> President | <input type="checkbox"/> Vice President | <input type="checkbox"/> Treasurer |
| <input type="checkbox"/> Football Coordinator | <input type="checkbox"/> Cheer Coordinator | <input type="checkbox"/> Academic Achievement |
| <input type="checkbox"/> Administrative Coordinator | <input type="checkbox"/> Player Agent | <input type="checkbox"/> Team Picture/Video Chairperson |
| <input type="checkbox"/> Webmaster | <input type="checkbox"/> Newsletter | <input type="checkbox"/> Advertising/PR |
| <input type="checkbox"/> Coordinator - Parent | <input type="checkbox"/> EMT/First Aid | <input type="checkbox"/> Coordinator - Cheer Parent / Equip |
| <input type="checkbox"/> Equipment Manager - Football | <input type="checkbox"/> PAR Coordinator | <input type="checkbox"/> Concession Manager |
| <input type="checkbox"/> Year Book | <input type="checkbox"/> Sponsor / Fundraiser Chairperson | <input type="checkbox"/> Special Forces |
| <input type="checkbox"/> Special Events | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Experience:

Please list any experience applicable to the position for which you are applying

Organization/Company	Year	City/State	Position/Brief Description
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

References:

Please list personal or professional references other than family members or relatives

Name	Address	Phone#	Occupation
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Administrators Code of Ethics

- I pledge to provide positive support to all youth sports programs in my community, to administer those with professionalism and in the best interests of the children involved by following the Youth Sports Administrators' Code of Ethics:
 - I will run youth sports programs for the children involved, not the adults.
 - I will ensure that I am knowledgeable in the area of youth sports administration.
 - I will do my best to provide a safe playing situation for all participants.
 - I will provide support for coaches, officials and parents to provide a positive and enjoyable experience for all.
 - I require all coaches & officials to be trained in the responsibilities of being a volunteer and that they uphold the NYSCA Codes of Ethics.
 - I will implement and enforce the National Standards For Youth Sports.
 - I promise to keep informed about current issues involving youth sports programs.
- I declare the above information to be truthful. I will adhere to all the standards and expectations set forth in this document.

Print Name _____ Signature _____ Date _____
 Association President's Signature _____ Date _____

- Acceptance of this application does not ensure a board position or an interview for said position.
- We reserve the right to eliminate incomplete applications from consideration