

**SOUTHERN CALIFORNIA
USA/ASA
VOLUNTEER APPLICATION FORM**

Today's Date _____
Last Name _____
First Name _____
Address _____
City _____ Zip _____
Home Phone _____
Work Phone _____
FAX _____
How late can you be called at home at night? _____
Is your phone line separate from the rest of the family? (Not a requirement) _____
If you have a fax, is it in your computer or a separate fax machine? _____
Do you have a dedicated fax line? _____
Can you be called at work by ASA Staff only? _____
What is your background in softball? _____
If you are/were associated with a J.O. Recreation League, how long? _____ What
League? _____
City: _____
Was this an ASA League? _____ Other? _____
In what capacity were you involved? _____
Are you currently involved with a Rec League and in what capacity? _____

If you are/were associated with a J.O. Travel Team, how long? _____
What Age Group? _____
What was the Team's Name? _____
Affiliated with ASA or other? _____
In what capacity were you involved? _____
Are you currently involved with a Travel Team
and in what capacity? _____
If you are/were associated with an Adult Program, how long
and in what capacity? _____
Womens ___ Mens ___ Fastpitch ___ Slowpitch ___ Modified ___
Since you have expressed an interest in volunteering for Southern California ASA, what are some areas of
the program that you would be interested in working
with? _____
_____ Adult ___ Youth ___ Travel ___ Rec ___ Umpire ___
Player Assoc. ___ Coaches Assoc. ___ Other ___

Please return to: Lorrie Ivie
Director, SoCalif Players Assoc.
7381 Pheasant Run Rd
Riverside CA. 92509