

Islamic Institute Ball Hockey League



VOLUNTEER AGREEMENT FORM

NAME: _____

CELL PHONE: _____

OTHER PHONE: _____

EMAIL CHECKED MOST OFTEN: _____

Coach **Referee** **Timekeeper** **Scorekeeper**

Check off the positions you are applying for. You may be required to fill in at positions not checked off above, if needed.

My commitment in terms of weeks and games each week

My experience working with kids, if any: (Returning volunteers, leave blank)

Why I want to volunteer in the IIBHL: (Returning volunteers, leave blank)

CONDITIONS FOR VOLUNTEERING:

1. I pledge to uphold and promote the IIBHL's vision of sportsmanship and brotherhood at all times as laid out in the IIBHL Code of Conduct, which I have read.

2. I know that not responding to league emails is a serious offence. I will check the email address given above often from now until the end of the season and respond immediately to emails regarding league matters. If not, decisions regarding my team and the league will be made for me.

READ CAREFULLY BEFORE SIGNING BELOW:

My signature below means that I understand that being allowed to volunteer in the IIBHL is a privilege that is given only to those who have been carefully chosen. I agree to abide by the above conditions for volunteering in the IIBHL for the 2023-2024 season. I understand that I may be dismissed from any involvement with the league if I violate any of the Conditions for Volunteering above.

SIGNATURE

DATE

Updated: August 5, 2023

