



Board Member Application

Name _____ Phone Number _____

Address _____

Email _____

Do you have children in the league? _____

Why do you want to be on the board? _____

In what capacity would you like to serve on the board? _____

Have you had prior involvement with GABSA? _____

In what capacity? _____

Please read the following and sign/date the application

As a board member, I agree to always respect and enforce the rules and policies of Little League Baseball and Softball and GABSA. I understand that any violation of the rules and policies of Little League Baseball or Softball and GABSA may result in my removal as a member of the Board of Directors.

I have never been convicted of a crime against a minor at any time or place in the United States or elsewhere.

Signature _____ Date _____

Note - You need to submit the attached security/background information, along with a copy of a photo ID with this application.