



**IC / MINGO CHIEFS FOOTBALL ASSOCIATION, INC.**  
**BOARD OF DIRECTORS APPLICATION**  
**(All information provided is confidential)**

**Personal Information (please print all information)**

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Drivers License#: \_\_\_\_\_ State: \_\_\_\_\_ Exp: \_\_\_\_\_

**Applicant Information:**

Circle position in which you wish to be considered for:

- President*      *Vice President*      *Treasurer*      *Secretary*      *FB Athletic Director*
- Cheer Athletic Director*      *Cheer Treasurer*      *Trustee*      *Director of Concessions*

Reason why: \_\_\_\_\_

Can you attend all Practices, Games, Meetings and Clinics:      ( ) YES      ( ) NO  
 If not, who would act in your absents? \_\_\_\_\_

Have you ever been suspended or expelled as a Coach in any youth sports organization?      ( ) YES      ( ) NO  
 If YES, Explain \_\_\_\_\_

**Organizational Background**

(Position)	(Team)	(League)	(Year)	(Record)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Give your reason for wanting to participate in Mingo Chiefs Organization: \_\_\_\_\_

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Experience working with other youth organizations: \_\_\_\_\_

Additional Information:

Character References: (List two personal references (no relatives) for character verification)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Have you ever been convicted of a felony? ( ) YES ( ) NO

If yes, when and where: \_\_\_\_\_

Have you ever been convicted of any crimes against children: ( ) YES ( ) NO

If yes, where and when: \_\_\_\_\_

Other than the above, is there any fact or circumstances involving your background that would call into question you being trusted with the supervision, guidance and care of young people? ( ) YES ( ) NO

If yes, explain: \_\_\_\_\_

**I understand that:**

- A. The information that I have provided may be verified, if necessary, by obtaining a record check and/or contacting persons or organizations that may have information concerning me. I hereby release and agree to hold harmless any person or organization that provided the information. I also agree to hold harmless The Mingo Chiefs Youth Football Association, officers and volunteers thereof and any person or organization that provided information.
- B. In signing this application, I affirm that the information I have given is true and correct.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Mail application or email an electronic copy to the following:

Jeffrey Campbell  
309 Janet Dr.  
Bloomington, OH 43910  
[mingochiefsfootball@comcast.net](mailto:mingochiefsfootball@comcast.net)

<b>Board:</b>	Approved	Disapproved	Date: _____
Position Assigned:	_____		
Notes:	_____		
<b>The IC/Mingo Chiefs Youth Football Association does not limit participation in its activities on the basis of disability, race, color, national origin, gender or religious preference.</b>			