

Consent for Honesdale “Missy” Softball League to conduct background check.

(FIRST)

(LAST)

NAME: _____

ADDRESS: _____

PHONE: _____

BIRTH DATE: _____

I hereby give permission to Honesdale Softball League (HSL) to conduct a background check due to my volunteer status with HSL. I participate with HSL and therefore, I am required to submit to a background check in order to volunteer to work with HSL participants therein. By signing below, I consent to the above.

If you file this form electronically via email, by typing in your name in the signature area you agree to the above information. To submit by email hit the “SUBMIT” button in the bottom right corner and follow the instructions.

Signature: _____

Date: _____

Return to HSL Board of Directors.

Mail to:
Honesdale Softball League
121 Sunrise Avenue
Honesdale, PA 18431

email to: info@honesdalesoftball.com

**SUBMIT
CLICK HERE**