

## KidSafe Disclosure Statement and Release Form Suffolk Youth Athletic Association (SYAA)

Kidsafe is a risk management program designed to foster safe circumstances for every person, and especially every child, who participates in an SYAA affiliated activity. It is a program to inform all SYAA personnel and SYAA members concerning the risks associated with our youth soccer programs. This form will be kept in absolute confidentiality by SYAA or each of its respective members and will be updated annually.

<b>Personal Information</b>	
Name <i>(Legal Name)</i>	
Address	
City/State/Zip	
Home Phone	Work Phone
Date of Birth	
Social Security Number	
Driver's License Number	
Employer	
Employer Address	
SYAA/League/Club/Team Affiliation	
Previous Affiliation if less than 3 years	
Current Position	

See overleaf

## Disclosure Statement

Please circle "YES" or "NO" to the following questions

1. Have you ever been arrested for or convicted of sexual abuse, physical abuse, or exploitation of any minor?	YES	NO
2. Are you now using illegal drugs?	YES	NO
3. Are you subject to any civil restraining order or any type of civil action relating to child or domestic abuse or violence?	YES	NO

If you answered yes to any of the above questions, please provide detailed information as to the nature of the offense, the number of separate offenses in question, the date of the offenses, the relationship between the offense and the position for which you are applying and any mitigating factors that should be taken into account.

## Release

I understand that my position with SYAA or any of its members is contingent upon my truthful completion and SYAA's or any of its members' review of this form. I authorize and understand that SYAA or any of its members will conduct a background check and may obtain a background report and that I may be requested to provide a set of fingerprints. I understand that I may be immediately discharged for any misrepresentation or material omission on this form. I understand that pending arrest or closed arrest is not an automatic bar to consideration of my application, but it is the intent of SYAA or any of its members to deny a position to any person who has been convicted of an offense that SYAA or a SYAA member determines disqualifies that person from providing services to SYAA or a SYAA member. I understand that SYAA or any of its members will take into account the nature of the offense, the date of the offense and the relationship between the offense and the position for which I am applying and any mitigating factors.

*Please Sign and Date*

Signature

Date