

Jackson Soccer Club – Volunteer Work Assignment Form

PLEASE COMPLETE ALL INFORMATION - DO NOT DATE CHECK
EACH FAMILY NEEDS TO COMPLETE ONE FORM ONLY

IF YOU HAVE A CHILD ON A TRAVEL TEAM, PLEASE SUBMIT THIS FORM TO YOUR TRAVEL COACH

Travel Team (List name of Travel Team(s), your child plays for): _____

Worker's Name: _____
Last Name of Person who will Work *First Name of Person who will Work*

Please list the names of all children registered for this upcoming season (Indicate REC or TRAVEL next to each):

Address: _____
Street Address *Town* *State* *Zip Code*

Contact Numbers: _____
Home *Mobile/Cell* *Other (Work, Other Cell)*

E-Mail Address (**PLEASE PROVIDE LEGIBLY**): _____

All assignments will be scheduled through email advisement. For each assignment, listed candidates will receive an email indicating: assignment, date, time and location. After you are assigned/scheduled, your name will be removed from the email list.

1. I agree to appear at time and place designated on this form. If I fail to appear, I understand that my work bond will be forfeited and will be cashed by the Jackson Soccer Club (JSC). Failure to appear within 15 minutes of the assigned time is cause for forfeiture of the work bond.
2. The JSC will attempt to post assignments on the club web site (www.jacksonsoccer.com). The club takes no responsibility to inform/remind you as to your assigned time other than this form and the web site. ***Information not posted on the website does not indicate that you are relieved of your work obligation. The website is only for information purposes if and when posted.***
3. If no specific time is indicated on this form (or if you have selected Registration, Fund Raising, Trophies or Administrative Support), you will be notified as to your assignment when those assignments have been scheduled.
4. If for any reason the JSC is unable to cash the work bond check, I understand that my child (children) will be ineligible to participate in any future Jackson Soccer Club activities, until such time as the work bond and any associated bank fees/penalties are paid in full.
5. I understand that if for any reason I am unable to perform my assignment, then it is my responsibility to find a replacement (over the age of 18) or forfeit the work bond. The name of the replacement must be furnished to the JSC in advance.
6. If the work bond assignment is cancelled by the JSC (i.e., field closings, inclement weather, and change of activity date) you will be released from your work bond obligation. Announcement to this effect will be posted on the web site.
7. **I understand that workbond assignments will be scheduled and updated through email.** If I do not provide an email address, I understand that I will be scheduled at the discretion of the Jackson Soccer Club. Questions regarding workbond can be sent to the JSC registrar.
8. I understand that only upon completion/release of my work bond assignment shall the work bond check be destroyed or returned to me.

Signature *Date*

Scheduled Assignment *Date* *Time* *Jackson Soccer Club Representative*

DONATION OPTION:

In lieu of my workbond obligation, I agree to donate my \$100.00 work bond check to the Jackson Soccer Club.

Contribution in lieu of work bond assignment: _____