



2026 Volunteer Checklist

- ☐ **Complete your PLL [Volunteer Application Form](#) (google form - must click link) Managers, Coaches, Team Parents, Team Scorekeepers - Register yourself as a volunteer online at**
[https://login.stacksports.com/login?client_id=612b0399b1854a002e427f78&redirect_uri=https://core-api.bluesombrero.com/login/redirect/portal/53584&app_name=Paradise+Little+League+\(CA\)&portalid=53584&instancekey=clubs&returnurl=%2fDefault.aspx%3ftabid%3d1173235](https://login.stacksports.com/login?client_id=612b0399b1854a002e427f78&redirect_uri=https://core-api.bluesombrero.com/login/redirect/portal/53584&app_name=Paradise+Little+League+(CA)&portalid=53584&instancekey=clubs&returnurl=%2fDefault.aspx%3ftabid%3d1173235)
- ☐ **Submit required documents** at an In-Person meeting or via email to volunteer@paradiselittleleague.org. Unless noted, all documents must be submitted each season.
Volunteer requirements - all documents can be found at paradiselittleleague.org
 - ALL Volunteers (due every new season)
 - ☐ Volunteer Code of Conduct
 - ☐ Volunteer Media Release
 - ☐ JDP Little League Application (online - link will be sent to you via email after you complete the steps above).
 - Managers/Coaches/Umpires and other regular volunteers
 - ☐ Live Scan per CA AB 506 (carries over each season)
 - ☐ Little League Diamond Leader Certificate (carries over each season)
<https://www.littleleague.org/diamondleader/>
 - ☐ Mandatory Reporter Training for CA Volunteers via Little League Abuse Awareness Certificate (due each season)
<https://www.littleleague.org/university/articles/abuse-awareness-training-course/>
 - ☐ ASAP Safety Plan Acknowledgement - Get the ASAP Safety Plan [here](#) or download from paradiselittleleague.org (due each season)

After registration is complete:

- ☐ Follow us on Facebook, Instagram, and/or subscribe to paradiselittleleague.org to ensure you don't miss any important updates or announcements
- ☐ Tee Ball & Farm managers can wait to get their team roster, by early February
- ☐ **Managers and Coaches of all competitive Divisions, AA+, must be at every player assessment and Managers must be available for the draft.** Assessments will be held at Egleson Field on 1/10/26 and 1/11/26.
- ☐ All managers contact your team within a week of receiving your roster to schedule a team meeting/first practice.
- ☐ All other volunteers will be contacted by committee leaders

Please note: Per PLL Bylaws, Managers and Coaches are selected by the League President and approved by the Board of Directors. In cases where *more* volunteers apply than there are vacancies, we may consider the date of your completed application, parent/player feedback, player attrition, history of service to PLL, whether you have a player in the division, and/or other relevant factors.



Media Release and Waiver

Legal Name:	Preferred Name:
Phone:	Email:
Birthdate:	

- ☐ I give permission to Paradise Little League (PLL) to use my image (photographs, voice, or video recordings taken at League events) to share, celebrate, or promote League activities. Images may be used on the PLL website and/or Social Media pages, and electronic and/or printed mail, flyers, and advertisements. I understand that I will not receive any compensation if such image appears in any of the manners listed above or any other manner that the League deems appropriate. I agree that such image is the property of Paradise Little League, but that I may use it for any non-commercial purposes.
- ☐ **I DO NOT** give permission to PLL to use my image for promotional purposes. I understand that some games may be live streamed or recorded by PLL or another Little League and that I may appear in these videos, which may or may not be publicly viewable.

Print Name

Signature

Date



Paradise Little League Volunteer Code of Conduct

The essential elements of character-building and ethics in sports are embodied in the concept of sportsmanship and the six core principles of: respect, trustworthiness, responsibility, fairness, caring, and good citizenship. The highest potential of sport is achieved when competition reflects these “six pillars of character” and PLL believes that our volunteers are the essence of our character. Paradise Little League has implemented the following Volunteer Code of Conduct to set our expectations for the conduct of our volunteers.

As a volunteer for Paradise Little League, I agree to the following:

1. I will not force any child to participate in sports and will remember that children play sports to have fun.
2. I will respect the rules of the game and the policies of the League and will teach all players to do the same.
3. I will teach all players that doing one's best is more important than winning. I will always praise a good effort, despite the outcome of the game.
4. I will emphasize the importance of practice and skill development over game play, especially at younger ages.
5. I will never ridicule or yell at any child, including youth umpires or other youth volunteers, for making a mistake or losing a competition.
6. I will refrain from coaching any player during games and practices, unless I am one of the official coaches of their team.
7. I will demand that every player treat other players, coaches, officials, and spectators with respect regardless of race, creed, color, sex, or ability.
8. I will promote the emotional and physical well-being of our players above all else.
9. I will not engage in any kind of unsportsmanlike conduct with any official, coach, player, parent, or the League, such as but not limited to booing, taunting, or using profane language or gestures, on or off the field, including on Social Media and other Online or electronic platforms.
10. I will be a positive role model for all children and encourage sportsmanship, by showing respect and courtesy, and by demonstrating positive support for all players, coaches, officials and spectators at every game, practice, and other League event.
11. I will not engage in or encourage any behaviors or practices, on or off the field, that might endanger the health and well being of the athletes, officials, or spectators.
12. I will respect and accept the decisions of the umpires and league officials regardless of whether I agree with them.
13. I will demand a sports environment that is free from drugs, tobacco, and alcohol and I will refrain from their use at all League events where children are present.

I understand that any volunteer who violates these Codes of Conduct must, at the request of the umpire or a League official, immediately and completely leave the facility and be suspended from the following game. Repeat or severe violations, or those against a child, may result in further disciplinary action, up to and including expulsion from the League.

Date

Print Name

Signature



REQUEST FOR LIVE SCAN SERVICE

Applicant Submission

ORI (Code assigned by DOJ)

Authorized Applicant Type

Type of License/Certification/Permit OR Working Title (Maximum 30 characters - if assigned by DOJ, use exact title assigned)

Contributing Agency Information:

Agency Authorized to Receive Criminal Record Information

Mail Code (five-digit code assigned by DOJ)

Street Address or P.O. Box

Contact Name (mandatory for all school submissions)

City

State

ZIP Code

Contact Telephone Number

Applicant Information:

Last Name

First Name

Middle Initial

Suffix

Other Name: (AKA or Alias)

Last Name

First Name

Suffix

Sex ☐ Male ☐ Female

Date of Birth

Driver's License Number

Height

Weight

Eye Color

Hair Color

Billing
Number

(Agency Billing Number)

Place of Birth (State or Country)

Social Security Number

Misc.
Number

(Other Identification Number)

Home

Address Street Address or P.O. Box

City

State

ZIP Code

I have received and read the included Privacy Notice, Privacy Act Statement, and Applicant's Privacy Rights.

Applicant Signature

Date

Your Number:

OCA Number (Agency Identifying Number)

Level of Service: ☐ DOJ ☐ FBI

(If the Level of Service indicates FBI, the fingerprints will be used to check the criminal history record information of the FBI.)

If re-submission, list original ATI number:

(Must provide proof of rejection)

Original ATI Number

Employer (Additional response for agencies specified by statute):

Employer Name

Street Address or P.O. Box

Telephone Number (optional)

City

State

ZIP Code

Mail Code (five digit code assigned by DOJ)

Live Scan Transaction Completed By:

Name of Operator

Date

Transmitting Agency

LSID

ATI Number

Amount Collected/Billed