

Please Note: The following is a dynamic form which allows you to type your information directly on the form and then print it. You will **NOT** be able to save your information.

After Printing the Form:

Send this form and a photo copy of your identification to the address below.

Mail the form to:

HYBS

PO Box 29

Hudson, MA 01749



Hudson Youth Baseball/Softball



HUDYB
172H
FE1651

PO Box 29
Hudson, MA 01749
- (978)562-6199 – info@hybs.org – www.hybs.org –

CHAPTER 6, §172H CORI REQUEST FORM

Hudson Youth Baseball is requesting all the available criminal offender record information (CORI) on the following individual from the Criminal History Board pursuant to Chapter 6, §172H which mandates organizations primarily engages in providing activities or programs to children 18 years of age or less that accepts volunteers, to obtain all CORI regarding volunteers prior to accepting any person as a volunteer.

VOLUNTEER INFORMATION (PLEASE PRINT)

LAST NAME FIRST NAME MIDDLE NAME

MAIDEN NAME OR ALIAS (IF APPLICABLE) PLACE OF BIRTH

____/____/____ _____-____-_____
DATE OF BIRTH SOCIAL SECURITY NUMBER
(Requested But Not Required)

MOTHER'S MAIDEN NAME: _____

CURRENT AND FORMER ADDRESSES

| ADDRESS | CITY | STATE | ZIP |
|---------|------|-------|-----|
| | | | |
| | | | |
| | | | |

SEX: _____ HEIGHT: _____ WEIGHT: _____ EYE COLOR: _____

STATE DRIVERS LICENSE NUMBER: _____

*THE INFORMATION WAS VERIFIED WITH THE FOLLOWING FORM OF GOVERNMENT ISSUES PHOTOGRAPHIC IDENTIFICATION: _____

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

DIVISION _____