

APPLICATION to COACH in BWYFA – 2009

Legal 1st name _____ Nickname (if applicable) _____ Legal Last name _____

Address _____ # & Street _____ City/State _____ ZIP _____

Date of Birth _____ Home phone _____
Month/Date/Year

Cell phone _____ Work phone _____ e-mail _____

Applying to coach (check one): _____ FOOTBALL _____ CHEERLEADING

Applying as Head Coach or Assistant Coach (check one): _____ HEAD COACH _____ ASS'T COACH

Preferred age group (1st choice & 2nd choice):

_____ 8 & under _____ 9 & under _____ 10 & under _____ 11 & under _____ 12 & 13

EXPERIENCE:

All experiences as a Youth HEAD Coach (yrs., level, organization/league) _____

All experiences as a Youth ASS'T Coach (yrs., level, organization/league) _____

Any other coaching experience (e.g. baseball, basketball, dance): _____

Check if you have valid certification for _____ CPR _____ First Aid _____ NYSCA

Have you ever been convicted of a felony? _____ Are you subject to any civil retraining order or any type of civil action re. child or domestic abuse? _____

If Yes, please provide dates, charges, and explanation (attach another sheet if necessary): _____

I understand that my volunteer position with BWYFA is contingent upon my truthful completion and review of this form. I authorize and understand that BWYFA may obtain a criminal history report that is visible only to BWYFA's President. I understand that I may be immediately discharged for any misrepresentation or material omission on this form. I understand that any pending arrest or closed arrest is not an automatic bar to consideration of my application, but it is the intent of BWYFA to deny a position to any person who has been convicted of sexual abuse or exploitation of a minor. Final decision on coaching positions will be decided by the officers of BWYFA.

Check here if you have read and agree to the previous statement _____

Signature _____ Date _____