



**COMMERCE PARKS & RECREATION DEPARTMENT
VOLUNTEER COACH APPLICATION**



DATE OF APPLICATION _____

NAME _____

HOME ADDRESS _____

STREET

CITY

STATE

ZIP

HOME PHONE _____ WORK PHONE _____

CELL PHONE _____ EMAIL _____

EMERGENCY CONTACT

NAME _____ RELATIONSHIP _____

CELL PHONE _____ HOME PHONE _____

PLEASE CHECK THE YOUTH SPORT YOU ARE VOLUNTEERING TO COACH:

- | | | |
|---------------------------------------|--|--|
| <input type="checkbox"/> BASEBALL | <input type="checkbox"/> FLAG FOOTBALL | <input type="checkbox"/> SOFTBALL |
| <input type="checkbox"/> BASKETBALL | <input type="checkbox"/> SOCCER | <input type="checkbox"/> TACKLE FOOTBALL |
| <input type="checkbox"/> CHEERLEADING | <input type="checkbox"/> SOFTBALL | <input type="checkbox"/> TRACK |
| | | <input type="checkbox"/> OTHER _____ |

PLEASE INDICATE WHICH POSITION YOU ARE VOLUNTEERING TO COACH AND THE AGE DIVISION, IF KNOWN:

- HEAD COACH
- ASSISTANT COACH

LEAGUE AGE DIVISION: _____

ARE YOU VOLUNTEERING TO COACH YOUR CHILD'S TEAM?

- NO
- YES - CHILD'S NAME _____ TEAM NAME, IF KNOWN: _____

HAVE YOU COACHED A YOUTH SPORT BEFORE?

- NO
- YES IF YES, PLEASE LIST SPORTS YOU HAVE COACHED: _____
- _____

ALL VOLUNTEER COACHES MUST FULFILL THE FOLLOWING REQUIREMENTS TO COACH WITH US:

COMPLETE A VOLUNTEER COACH APPLICATION

SUBMIT TO AND PASS A CRIMINAL HISTORY CHECK - ORIGINAL COPY WITH ORIGINAL SIGNATURE REQUIRED - Must be signed in person