FORT LIBERTY

YOUTH SPORTS & FITNESS VOLUNTEER APPLICATION

NAME	PHONE	CELL
ADDRESS	CITY / STATE	ZIP
EMAIL (PERSONAL)	AGE	GENDER
HAVE YOU PREVIOUSLY SUBMITTED AN APP	PLICATION? ()YES ()NO IF YES, Y	WHEN?
PREVIOUS COACHING, ASSISTANT COACHIN	G, OR TEAM PARENT EXPERIENCE / RELI	
POSITION APPLYING FOR: () HE IN WHICH LOCATOIN WOULD YOU PREFER	AD COACH () ASSISTANT C	OACH () TEAM MOM/DAD () LINDEN OAKS
TYPE OF VOLUNTEER WORK (PLEASE CHECK FALL: () SOCCER () FLAG F () TENNIS PREFERRE WINTER: () BASKETBALL () CHEER	(ALL THAT APPLY): OOTBALL () TACKLE FOOTBALL D AGES:	() CHEERLEADING () VOLLEYBALL PREFERRED AGES:
SPRING: () SOCCER () T-BALL () SOFTBALL () LACRO	() COACH PITCH	() BASEBALL PREFERRED AGES:
SUMMER SPORTS CLINICS: () FOOTE	BALL () SOCCER	() CHEERLEADING
HAVE YOU EVER BEEN ARRESTED FOR OR CH OR A VIOLENT CRIME? ()YES ()N		VOLVING A CHILD, A SUBSTANCE ABUSE FELONY
HAVE YOU EVER BEEN ASKED TO RESIGN OF SEXUAL OFFENSE? () YES () NO	BEEN NOT SELECTED FOR COACHING B	ECAUSE OF OR BEEN DECERTIFIED FOR A
IF YES, PLEASE PROVIDE A DESCRIPTION OF	THE CASE DISPOSITION.	
		PLICATION FORM AND ANY ATTACHMENTS OR ARE TRUE AND CORRECT TO THE BEST OF MY

SIGNATURE

DATE

IF YOU HAVE NOT BEEN SELECTED TO COACH WITHIN ONE YEAR OF THIS APPLICATION, YOU MUST RE-APPLY *COACHING POSITIONS <u>ARE NOT GUARANTEE</u>*