Wood River Parks & Recreation
Youth League Coaching Application

All Coaches must complete this application and acknowledge the Coaches Code of ethics to be considered as a potential volunteer coach for Bi/Tri-City Recreation Programs. We reserve the right to refuse any coaches application for any reason.

Last Name **Middle Initial** **First Name**

Street Address **City** **Zip Code**

Home Phone **Work Phone** **Cell Phone / E-mail**

Circle One: **Head Coach** **Assistant Coach**

What Division or League: _____

What sport are you volunteering to coach? _____

Child Participating or wishing to coach: _____

Qualification/Experience: _____

BACKGROUND CHECK

To be eligible to coach, all applicants will be subjected to criminal background checks. This is for the safety of he children participating. Please sign the following consent statement.

I, the undersigned, in connection with this application, hereby authorize the Wood River Recreation Department to investigate my criminal history through proper law enforcement channels and release the department and it's agents from any liability or responsibility from doing so.

Signature: _____ **Birth Date:** ___/___/___ **Date Signed:** ___/___/___

CODE OF ETHICS

I, _____**, have read the Coached Code of Ethics and I fully understand that if I am selected to be a volunteer, I will follow and abide by them.**

Signature: _____ **Date:** _____

Office Use ONLY

Approved by: _____ **Date** _____