

Coaches Application

1. Name: _____
2. Address: _____
3. City: _____ State: _____ Zip _____
4. Phone# (H) _____ (W) _____
- Cell# _____ Email Address _____

5. Have you every coached youth sports: Yes No

6. Please fill out the information below. If you coached other youth leagues you may list that organization as a reference:

REFERENCE	PHONE#	STATE

7. Do you have any children in the program? Yes No

8. Which grade level do you wish to coach? _____

9. Is there a particular day or time that does not suit your schedule for practice?

10. Have you ever been indicted on criminal charges? If so, explain _____

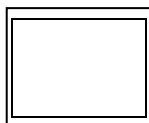
I certify that the facts contained in this information sheet are true and complete to the best of my knowledge. I will read the YMCA Sports Philosophy and will abide by and uphold the guidelines of YMCA Youth Basketball League.

Applicant: _____

(Print Name)

Applicant Signature _____ **Date:** _____

*****Please mail back to YMCA attention John Kampes:**



YMCA Staff
has performed a criminal background
check on applicant.

**YMCA of Cecil County
25 YMCA Blvd.
Elkton, MD 21921**