



Other Reference 1: _____
Name Contact Phone Number

Other Reference 2: _____
Name Contact Phone Number

Medical Conditions: _____

PERSONAL BIO: (Provide no less than 2 sentences about yourself and why you want to coach youth sports. Use additional paper if needed.)

All final applicants will need to successfully complete a background check prior to the start of the 2010 season.

SIGNATURES:

To the best of my knowledge, all of the information given on this form is factual. I understand that the League will take Disciplinary action against the individual, team and Association that presents falsified information on documents. I've also read the code of conduct and will follow it to the best of my ability and understand by not doing so I could forfeit my coaching assignment if I violate any of the rules.

Coch (Applicant): _____ **Date:** _____
Signature

Area Representative: _____ **Date:** _____
Signature

DO NOT WRITE BELOW THIS LINE – Authorized Personnel Only

Approved: Yes No Position Approved For: _____

Assoc Coaching Director: _____ / _____
Initials Date

President/Vice President: _____
Signature Date