

2000 Camp Zama Youth Sports - Coaching Application

(a:\apply95.doc B File 1 September 2000)

Name: _____ Rank: _____ Age: _____
(Last) (First) (Middle)

Mailing Address: Unit # _____ Box _____ APO AP _____

Are you on the Global Email system: Yes ___ NO ___ Other email address: _____

Duty #: _____ Home #: _____ Fax: _____ Deros: _____

Check one! Head Coach _____ Assistant _____ w/ _____

Check the applicable sport you wish to coach. Prioritize which age group you wish to coach:

(Select only one sport - this application is good for one sport)

- | | | | | | |
|---------------------|-----------|------------|------------|-------------|-------------|
| 1. Basketball | 5-6 _____ | 7-8 _____ | 9-10 _____ | 11-12 _____ | 13-15 _____ |
| 2. Baseball | 5-6 _____ | 7-8 _____ | 9-10 _____ | 11-12 _____ | 13-15 _____ |
| 3. Softball (Girls) | | | 9-12 _____ | | 13-15 _____ |
| 4. Soccer | 5-6 _____ | 7-8 _____ | 9-10 _____ | 11-12 _____ | 13-15 _____ |
| 5. Flag Football | | 7-10 _____ | | 11-15 _____ | |
| 6. Cheerleading | | 7-10 _____ | | 11-15 _____ | |
| 7. Inline Hockey | | 7-10 _____ | | 11-14 _____ | |

Are you planning to coach your child? If so, provide child's first and last name:

First Child Name: _____ Age _____

2nd Child: _____ Age _____ Others _____ Age _____

How many years did you **Coached?** _____ Describe your coaching experience:

The final selection of coaches is determined by experience, previous history with Youth Sports, and availability of positions. In accepting a volunteer position in the Youth Sports program, you agree to abide by the policies set forth by Youth Services and understand a background check for child and drug abuse is required. Background check form is attached; please fill out completely.

Date: _____ Signature of Applicant: _____