Queensbury Department of Parks & Recreation 742 Bay Road, Queensbury, NY 12804 * (518) 761-8216

CONFIDENTIAL

VOLUNTEER COACH APPLICATION

NAME							
ADDRESS	LAST		FIRST		MI		
CITY		_STATE	ZIP	E-MAIL_			
HOME PH #_		WO	RK PH #		SS#_	(MANDATORY)	
OCCUPATION			EM	PLOYER		(MANDATORY)	
EMPLOYER AI	DDRESS						
						ZIP	
	AFFILIATIONS (
PREVIOUS VC	DLUNTEER EXPER	RIENCES (co	paching or othe	er):			
SPECIAL CER	ΓΙΓΙCATIONS (ie	. First Aid, (CPR, etc.)				
1. Have you	OF THE FOLLOV ever been convic describe in full:_	ted of any o	crime (s):	YE		NO	
	icate the sport (s (indoor/fall)			-			
	ortable are you i Totally	n teaching t Somewl		s of sports? (Limited	Please circ	cle one)	
Îf yes,	ve children partion please list their in nship to child pa	names					
•	terested working please list the na			YES	NO		
	ever participated what program?;			training prog			

YES NO
nization, address, & phone #) Phone
plication, to the best of that if any information esult in immediate dis- Recreation. I authorize and all others from liabil-
Date X
sonal desire to win. tional and physical reat injuries of my players. players. a players. b, and alcohol, and I will ch these rules to my

PLEASE NOTE: ALL Volunteer Coach Applications will be treated as confidential documents and therefore kept in a secure file at the Department office.

Signature X_____

Date X_____