



Youth Coach and Assistant Coach Application Form

Please check Deep Creek Great Bridge Indian River Oscar Smith River Crest South Norfolk Western Branch
Preferences: Head Coach Assistant Coach

Please Print Clearly Full Name (NO INITIALS) All Information Must Be Provided

Last Name First Middle Maiden Sex Date of Birth (mm/dd/yy)

Street Address City State Zip Code

E-mail (required) Social Security Number

Child's Name _____ Child's Date of Birth _____ Age _____

Cell Phone _____ Home Phone _____ Cell Phone _____

Position: Head Coach _____ Asst. Coach _____

Indicate either head coach or assistant coach you wish to be paired with above

Sport: (please check) Football Cheerleading Softball Soccer Basketball Boys Basketball Girls Volleyball

Division: (please check) Tiny Tot 5 & 6 Training 7 & 8 Midget 9 & 10 Junior 11 & 12
 Teen 13 & 14 Senior 15 & 16 Super Senior 17 & 18

List your qualifications and experiences: _____

It is understood that if accepted by the Chesapeake Parks, Recreation and Tourism Department, as a volunteer coach, I will support and enforce the Coaches Ethic:

1. **To attend all meetings and rules clinics** set up by the Department prior to the beginning of each sport season.
2. **I will promote team play that is safe, fun and enjoyable** remembering that competition encourages cooperation, self-discipline and motivation while enhancing the development of life lasting traits. I will lead my team remembering that competition is a process for children to learn.
3. **I will promote the respect in one's self and others through good sportsmanship** by emphasizing the development of cooperation and respectful behavior towards teammates, opponents, referees and coaches. I will help each child feel good about himself/herself.
4. **I will promote responsibility in one's life through encouraged participation** and emphasizing one's effort is more important than the final score.
5. **I will promote sports fundamentals** which are essential to enjoy the game. I will strive to develop each child's skills and abilities to the fullest potential.

In addition to the Coaches Ethic, I will also abide by the following rules:

1. I will return all issued equipment no later than 10 days following the last played game.
2. I will ensure that I am knowledgeable in the rules of the sport and teach these rules to my players.
3. I will seek approval from the Parks, Recreation and Tourism Department prior to any discipline or dismissal of any player because of misconduct or unexcused absences.
4. I will notify my players and/or parents of practice times and locations. I will also organize practices that are fun and challenging for all my players.

I understand the above ethic and rules, and that any violation of said ethic and rules could result in losing my right to coach. I also understand that I am under the direction of the current Athletic Rules and Policies and the Parks, Recreation and Tourism Department staff. Due to the nature of our Department's responsibilities and liabilities, it will be necessary to perform background checks on volunteers for the protection and welfare of program participants. The information above will be used for this purpose.

Signed _____ Date _____

Staff _____ Date _____