

Volunteer Basketball Coach Application

Please submit to the Parks & Recreation office no later than Friday, November 8, 2019

It is the Town's policy to provide a safe environment and therefore shall perform a criminal history background check on each Youth Basketball Coach Applicant. By completing this form you are consenting to a criminal history background check. Completion of a form does not guaranteed placement

COACH INFORMATION

Name: _____ Email: _____

Are you at least 18 years of age? Yes _____ No _____ Shirt Size: _____ Social Security #: _____

Address: _____ Town: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Child I wish to coach: _____ Grade: _____ Male / Female

Program you are interested in volunteering for (select all that may apply):

Head Coach Asst. Coach Boys League Girls League
2nd Grade 3rd / 4th Grade 5th / 6th Grade 7th / 8th Grade Grades 9-12

Please list any nights that you ARE available to practice - (no weeknight practice for Kindergarten and grade 1, grade 2 will play on Thursday evenings at Valley View) – practices are held one hour per week / may be scheduled Monday through Friday at 5:00, 6:00, 7:00 or 8:00 PM

Days and times I AM available to coach: _____

If possible, I would like to coach with: _____

Coaches are required to attend the Orientation Meeting prior to the start of the season. Dates are TBD

Please list any certifications you hold that are relevant to this position, include expiration dates (i.e. CPR/ First Aid/ etc.):

Have you ever been convicted of a convicted of law violation other than a minor traffic offense: Yes _____ No _____

If yes, please explain: _____

For purposes of this application, reckless driving, evading responsibility, engaging in pursuit, driving while impaired and driving while intoxicated are not considered minor traffic offenses.

HOLD HARMLESS AGREEMENT

I further release, hold harmless, for myself and for my heirs, assigns, successors, executors, administrators, and legal representatives, agree that I will not sue the Town of Portland, or its agents, servants, or employees, from or regarding any injury or loss to person or property, including wrongful death or emotional injury, that I may sustain while performing community service work for the Town of Portland, even if such injury or loss was caused by the negligence of the Town of Portland or its agents, servants or employees. I do understand that if I am injured while performing assigned work I will report it immediately, but as I am not an employee of the Town of Portland I have no right to claim a worker's compensation injury. Further, that I will be responsible for any medical bills should I become injured. I understand that by signing this form, hereby agree to abide by proper workforce conduct and will conduct myself in a respectful manner while working with Town employees, Town Officials and the general public.

CERTIFICATION

By signing, you are attesting that you have read the above Hold Harmless Agreement

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected."

Applicant Signature: _____ Date: _____