

TOWN OF MONROE

PARKS & RECREATION DEPARTMENT

7 Fan Hill Road Monroe, CT 06468 Email:parksandrec@monroect.gov Phone: 203-452-2806 www.monroerec.org



Coaches Application

Name								
	Last	First		M.I.			laiden	
				Date of Birth				
Phone #'s	home		work		cell			
Email add	ress							
Spouses N	lame							
Children c	urrently partici	pating in our youth bask	ketball league	· 				
	<u>Name</u>			<u>League(s)</u>				
_								
		Do you want to coach	your child?	Yes	No	=		
Previous <u>basketball</u> coaching experience (use reverse side for additional information)								
Monroe P	arks and Recrea	ation leagues						
Other Mo	nroe leagues							
Other tow	ns/sports							
Position D		Head Coach			nt Coach _			
		<u>Number</u>	league in ord	er of preference				
_	BOYS			GIRLS				
	rade 3/4			Grade 3/4				
	rade 5/6 rade 7/8			Grade 5/6 Grade 7/8				
to adhere will coope and sports the Parks a FOR THE I MONROE	to each of the rate with all of smanlike mann and Recreation PRIVILEGE OF (ledge I have read and uppoints listed. I underst his/her league instructions. If selected as a volument to be in the COACHING AND WORK RIGHT TO CHECK THE INVOLVED.	cand I am coa ons and rules nteer coach, I e best interes ING CLOSE W	ching under the lo . I will always con understand I can t of the overall pro //TH THE YOUTH	eadership of duct mysel be replace ogram and IN OUR CO	of each lead lead at any participa of the control o	league director an ad my team in a fa y time if deemed b ants. IN EXCHANG NITY THE TOWN O	
Signature	of coach				ח	ate		

TOWN OF MONROE

CRIMINAL BACKGROUND CHECK REQUEST & RELEASE FROM LIABILITY

and maintaining a to allow the Town I further agree to t my employment.
purposes only and
lied you with the ing the requested

Social Security Number

Date of Birth

Signature

Date