TOWN OF MONROE

PARKS & RECREATION DEPARTMENT

7 Fan Hill Road Monroe, CT 06468

parksandrec@monroect.gov

Phone: 203-452-2806

www.monroerec.org

Monroe Parks and Recreation

Wolfe Park * Masuk Pool

Lake Zoar * Webb Mountain Camping

Coaches Application-Youth Basketball League

Name _____
Last First M.I. Maiden

Home Address _____ Date of Birth ____/____/____

Phone #'s home _____ work _____ cell _____

Email address _____

Spouses Name _____

Children currently participating in our youth basketball league –

Name ***League(s)***

_____

_____

Do you want to coach your child? Yes ___ No ___

Previous basketball coaching experience (use reverse side for additional information)

Monroe Parks and Recreation leagues only - _____

Other Monroe youth leagues - _____

Other towns/sports - _____

Position Desired: Head Coach _____ Assistant Coach _____

Number league in order of preference

BOYS	GIRLS
Grade 2/3 _____	Grade 2/3 _____
Grade 4/5 _____	Grade 4/5 _____
Grade 6/7/8 _____	Grade 6/7/8 _____

By my signature I acknowledge I have read and understand the attached Coaches Code of Ethics and will do my utmost to adhere to each of the points listed. I understand I am coaching under the leadership of each site director and will cooperate with all of his/her league instructions and rules. I will always conduct myself and lead my team in a fair and sportsmanlike manner. If selected as a volunteer coach, I understand I can be replaced at any time if deemed by the Parks and Recreation Department to be in the best interest of the overall program and participants. **IN EXCHANGE FOR THE PRIVILEGE OF COACHING AND WORKING CLOSE WITH THE YOUTH IN OUR COMMUNITY THE TOWN OF MONROE DOES A BACKGROUND CHECK OF ANY AND ALL APPLICANTS FOR THE PROTECTION OF THE YOUNGSTERS INVOLVED**.

Signature of coach _____ Date _____

TOWN OF MONROE

CRIMINAL BACKGROUND CHECK REQUEST
& RELEASE FROM LIABILITY

The position for which I am applying/volunteering for is: _____.

I understand that the position for which I am being considered requires having and maintaining a satisfactory criminal background check as a condition of my volunteering. I agree to allow the Town of Monroe to check my record prior to being selected as a volunteer coach and to check it periodically thereafter. I further agree to report immediately to the basketball coordinator any offenses after I am selected that may affect my coaching responsibilities.

I understand that the Town of Monroe will use this information for my volunteer purposes only and not furnish this information to a third party without my written consent.

I agree to release the Town of Monroe, its employees, and those who supplied you with the information from any liability for any damage which may result from furnishing the requested information or my failure to be selected for the position for which I am applying.

Please print legibly

_____
Print Name

_____
Social Security Number

_____
Legal Home Address

_____
Date of Birth

_____
Signature

_____
Date