

ULYFL Coaching Application

Please review responsibilities and policies prior to completing this application.

PERSONAL INFORMATION:

Date of Completion of this Form: ____/____/____

Full Legal Name: _____

Date of Birth: ____/____/____ **Other Names (maiden, alias, etc.):** _____

Male or Female: _____ **Social Security Number:** _____-_____-_____

Driver's License Number: _____ **State:** ____ **Expires:** ____/____/____ **Attach Copy-Front & Back**

Home Phone Number: (____)____-____ **Work:** (____)____-____ **Cell:** (____)____-____

E-Mail Address: _____

HOME ADDRESS: List all for the past 7 years

Present (include dates): _____

Previous (include dates): _____

(attach a separate sheet if additional space is needed)

CHILDREN IN LEAGUE:

<u>Name</u>	<u>Age</u>	<u>Division (A, B, C or Flag)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

POSITION APPLYING FOR:

LEAGUE: **A** **B** **C** **Flag**

Football Head Coach Assistant Coach

Cheerleading Head Coach Assistant Coach

COACHING EXPERIENCE:

Are you certified by NYSCA? Yes ____ No ____ **Please attach a copy of your certification.**

Have you ever been convicted of a felony or any crime involving violence or abuse? _____ If yes, please provide details.

Have you ever been refused participation in any other youth sports program? (if yes, explain)

What are your personal goals as a coach?

Coaching is a very rewarding way to be involved in youth sports. Generally, a coach assumes the responsibility of doing everything possible to ensure that the youngsters on his or her team will have an enjoyable and safe experience while they learn football or cheerleading skills. If you are ever in doubt about your approach, remind yourself that “fun and fundamentals” are most important.

Being a coach for the Upper Loudoun Youth Football program involves a lot more. We are very proud of our football and cheerleading program and strive to make sure the best possible candidates are coaching the children of our league each year. Below are some of the responsibilities of the coaches in our league. Please read through each item, sign and return this form when you are sure this commitment is right for you.

- **Football and cheerleading should be fun. If we take the fun out of the sport, we take the kids out of the sport! Coaches need to make this experience fun for the kids.**
- **All Coaches in this league need to stress the importance of good sportsmanship!**
- **All Head Coaches and Assistants must attend NYSCA coaching clinics.**
- **Use of Alcohol or ANY tobacco products at practice or game facilities is strictly prohibited.**
- **Safety is a must! Coaches should use practices to mentally and physically prepare their team. Proper conditioning of athletes significantly reduces the chance of injury.**
- **Coaches must be dependable. The coach must be at each practice, game and team functions prior to the team and stay until each child has been picked up. Head Coaches must also attend the monthly board meetings so they can pass along league information to the players and parents.**
- **Head Coaches should surround themselves with good people. Assistants need to be quality people and the Head Coach must feel comfortable that their Assistants have the knowledge and ability to run the team in his or her absence. A good team parent is crucial! That person must help shoulder the fundraising coordination and scheduling of responsibilities for the team.**
- **Coaches must represent the league in fundraisers. Our league is a non-profit organization run solely by volunteers. The cost of running the league is very expensive and we cannot survive without fundraisers and the support of our coaches, parents and volunteers.**
- **A Head Coach in this league must be willing to help when help is needed. Clean-up after games, announcing, running the clock, concession stand, cooking, etc. It is easy to overlook what it takes to run this league and Head Coaches need to be willing to step in when help is needed.**

By signing this application, I the undersigned acknowledge having read and agree with all the responsibilities and policies listed on this form. I agree to follow any and all decisions of the Board of Directors and the League By-Laws (copies available). I also understand and agree that Upper Loudoun Youth Football reserves the right to dismiss a coach that is in violation of any league policies.

Signature: _____

Date: ____/____/____

Acknowledgement of Receipt of Upper Loudoun Youth Football Policy on Child Abuse/Molestation.

I acknowledge that on _____(date) I was given a copy of the sports organization’s Policy on Child Abuse/Molestation Risk and that I have carefully reviewed it and voluntarily agree that as a condition of future participation, employment or involvement in this organization, I will abide by all the terms, conditions, policies, and procedures contained within this program.

I also understand that Upper Loudoun Youth Football shall have the right to dismiss me if I violate or fail to abide by the Policy on Child Abuse/Molestation.

If I violate the policies, regulations, or spirit of this program, I will indemnify and hold harmless the sports organization, its employees, board members, volunteers and officials from any and all liability including negligence and any intentional tort claims.

Signature: _____ Date: ____/____/____

Consent/Release

I understand that:

The information that I have provided may be verified, if necessary, by contacting persons or organizations named in this application, or running a local and national criminal background check. I hereby release and agree to hold harmless from liability any person or organization that provides information. I also agree to hold harmless the Upper Loudoun Youth Football League and volunteers thereof.

I authorize this information to be obtained either in writing, via internet or via telephone in connection with my application.

I understand that my position is contingent upon adverse information about my background or character not being uncovered upon the performance of the above referenced checks. I also understand that regardless of my prior volunteer activities on behalf of ULYFL, that ULYFL is not required to allow my continued participation.

I agree to hold harmless and indemnify from liability ULYFL and its directors, officers, employees and volunteers from all liability arising out of the use of the information that is uncovered in the above referenced checks.

In signing this application, I affirm that the information I have given is true and correct.

Signature: _____ Date: ____/____/____

THE PERSONAL INFORMATION CONTAINED IN THIS APPLICATION WILL BE KEPT IN ABSOLUTE CONFIDENTIALITY BY UPPER LOUDOUN YOUTH FOOTBALL OR EACH OF ITS RESPECTIVE MEMBERS AND WILL BE UPDATED ANNUALLY.