



Recreation Coach Application

Personal Information:

First Name _____ MI. _____ Last _____

Address: _____ Zip: _____

Date of Birth: ____/____/____

Primary Phone: _____ Alt. _____

Email address: _____

Preferred Contact : Text Call Email Any

***Division:**

Basketball: 3-6y 6-9y 9-11y 11-14y

Baseball: T-ball Coach Pitch 10U travel 12U travel 14U travel

10U Softball 12U Softball 14U Softball

***Desired Position:**

Head Coach Asst. Coach

- Desired position not guaranteed

***All coaches must submit an application in order to sit on the team bench.**

***Experience:** _____

***Shirt Size:**

AS AM AL AXL AXLI other _____

Name and Age of dependent children in the program.

Childs Name	Age

By submitting this application I _____, hereby agree to a criminal background check done by the Carrollton Township Police Department via I-Chat.

I also hereby agree to abide by the Carrollton Recreation Department's Code of Conduct and I also agree to abide by the Carrollton Township Sportsmanlike Conduct Ordinance (Sec.30-160). Which if violated, may result in a municipal civil infraction ticket and/or removal from participation or coaching at any sporting events or activities sponsored by the Carrollton Township Recreation Department.

I understand completing this application does not guarantee a coaching position.

Players who are automatically on placed on coaches team will be their children and or grandchildren. All other players must be drafted.

Applicant's Name (printed) _____

Applicants Signature: _____ Date: _____