



YOUTH BASKETBALL COACHING APPLICATION FORM

Circle one: **Head Coach** **Assistant Coach**

First Name _____ MI _____ Last Name _____

Address _____ City _____ Zip _____

Contact Phone # _____ Email Address: _____

Name of Person Coaching With: _____

Circle all that apply: 2009- 2010 Leagues

- Girl's Grade 3 – 5th (fall)* *Girl's Grade 6 – 8th(fall)* *Boy's Grade 5 & 6th (fall)*
- Boy's Grade 3 & 4th (fall & winter)* *Boy's Grade 7 & 8th (fall)*
- Girl's Grade 9-12th (winter)* *Boy's Grade 5-7th (winter)* *Girl's Grade 4-6th (winter)*
- Boy's Grade 8 & 9th (winter & spring)* *Boy's Grade 10 - 12th (winter & spring)*

Rank 1 – 4 with 1 being your first choice, for your preferred practice days/times.

Practice Day(s): _____ Monday _____ Tuesday _____ Wednesday _____ Thursday

Practice Options & Times: Check all times that you are available to coach.

_____ 2-nights/week for 1 hour each day @ _____ 6:00 - 7:00PM _____ 7:00 – 8:00PM _____ 8:00 – 9:00 PM

_____ 1-night/week for 2 hours @ _____ 6:00 - 8:00 PM _____ 7:00 – 9:00 PM

Note: Youngest players will get the earliest times IF the coach is available.

Coaching Experience:

***** PLEASE NOTE *****

A police records check is one of the criteria for determining eligibility for volunteering for this program. The information obtained is strictly confidential. **I authorize Northville Parks and Recreation to process a police background records check.**

Signature _____ Date _____

Date of Birth _____ (M/D/Y)