VISITATION B.V.M. PARISH
APPLICATION TO COACH
CYO PARISH ATHLETIC PROGRAM

NAME ___________________________________ PHONE (Home) _______________________

PHONE (Work) _______________________

ADDRESS _______________________________________________________________________

CITY ___________________________ STATE _________ ZIP ______________

OCCUPATION _________________________________________________________________

SPORT ______________________ GRADE DESIRED ________________________________

NAMES & AGES OF CHILDREN _______________________ GRADE __________

_________________________ GRADE __________

_________________________ GRADE __________

_________________________ GRADE __________

_________________________ GRADE __________

If more than 4 children - others _______________________ GRADE __________

ARE YOU HIGH SCHOOL AGE (9th GRADE) OR OLDER? __________
COACHING EXPERIENCE

Have you coached Catholic Youth Sports before? ______ If yes, list sports, dates, grades, and parishes:
______________________________________________________________________________
______________________________________________________________________________

Have you coached other youth sports before? ______ If yes, list sports, dates, grades, and organizations:
______________________________________________________________________________
______________________________________________________________________________

Have you worked with youth previously in programs other than sports? ____ If yes, list below:
______________________________________________________________________________
______________________________________________________________________________

Are you active in any other parish organizations (List)?
______________________________________________________________________________
______________________________________________________________________________

Are you certified in Red Cross first aid? _________ CPR __________________________
ADDITIONAL QUESTIONS

Why do you want to coach?
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

How do you see your role of a coach as a minister to youth?
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

What goals do you have for the coming season?
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

What are the areas that you have a need for training?
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Have you ever been disciplined or removed by another parish program, or by any other youth-serving organization? _________ If yes, please provide details:
___________________________________________________________________
___________________________________________________________________

I certify that the above answers are accurate and true to the best of my knowledge. I will agree to abide by the parish and league rules, The Code of Conduct, and the direction of officials as a volunteer coach. I understand that to coach, I must be accepted by the parish organization and complete Diocesan Coaches Certification requirements by attendance annually at a Coaches Certification Workshop for the sport I wish to coach.

Date: __________________   Signature _________________________________
Interviewed by: _______________________________________ Date ____________________

Accepted ______________________ Grade / Sport Assigned ____________________________

Rejected ______________________

Signed ___________________________________________ Athletic