



Prescott YMCA Youth Volleyball League

2025 Volunteer Application

Coach / Assistant Coach / Referee

YMCA Mission: To put Christian principles into practice through programs that build healthy spirit, mind and body for all.

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____

Cell # _____

EMAIL: _____

Are you 18 years or older? Yes / No Have you coached at the Prescott YMCA before? Yes / No

Do you have a child playing in the league (list child's name & age)? _____

What age group(s) would you like to Coach in? (PLEASE CIRCLE BELOW)

Division "B" Coed 9-10 Coed 11-12 Coed 13-17

Division "A" Coed 11-13 Coed 14-17

Position: Coach Assistant Coach Referee

Name of person you would like to coach with _____

Please check times you are available for practice (Check at least 3)

Monday	4:00-5:00 _____	5:00-6:00 _____	6:00-7:00 _____	7:00-8:00 _____
Tuesday	4:00-5:00 _____	5:00-6:00 _____	6:00-7:00 _____	7:00-8:00 _____
Wednesday	4:00-5:00 _____	5:00-6:00 _____	6:00-7:00 _____	7:00-8:00 _____
Thursday	4:00-5:00 _____	5:00-6:00 _____	6:00-7:00 _____	7:00-8:00 _____
Friday	4:00-5:00 _____	5:00-6:00 _____	6:00-7:00 _____	7:00-8:00 _____

(IF COACHING "A" LEAGUE PLEASE NOTE IF YOU WANT ONE 2 hr PRACTICE OR TWO 1 hr PRACTICES)



Have you ever been charged for any crime (excluding minor traffic violations not involving any allegation of drug or alcohol impairment, but including any allegation as defined in ARS 13-3821)? You must answer "yes" even if the matter was later dismissed, deferred, vacated or expunged. If you answer "yes" you must provide dates of the proceedings, the court where the proceedings occurred, and a statement of the accusation against you and the final disposition of the case(s).

No _____ Yes _____ Explanation _____

In a united effort to further keep Prescott children safe, the YMCA will be requiring all volunteers to submit to a background check. Although there is a fee for this process, the YMCA will be absorbing the cost.

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I hereby certify under penalty of perjury that the answers given above are true and correct to the best of my knowledge and belief. I understand and consent to the Prescott YMCA using the aforementioned references as well as public records in order to help determine my eligibility for a volunteer position.

Printed Applicant's Name

Date

Signature of Applicant

NOTES FOR SPORTS DEPARTMENT: (i.e. Requests to coach more than one team, sponsor affiliation for your team, etc.)
