



Prescott YMCA NFL Flag Football League
Volunteer Application
Coach / Assistant Coach / Referee

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Name:	Home Phone:
Address:	Work Phone:
City:	Cell Phone:
State/Zip:	Email:
Birth Date:	Shirt Size:

Attendance at a Pre-Season Meeting is mandatory for your participation in this league. Meeting will be held Wednesday, May 4th @ 6:00pm. Meetings are held in the YMCA Board Room and last approximately one half hour. Please mark your calendars.

Coach Meeting Wednesday, May 4th
MANDATORY @ 6:00pm

Are you 18 Years or older? Yes No
 Have you coached at the Prescott YMCA before? Yes No
 If so what sport and how long? _____

I would like to volunteer (Circle One): Coach Asst. Coach Referee

What age group would you like to participate in? (Circle One)
 6-8 9-10 11-13 14-16

Name of person you would like to coach with:
Do you have a child in this age group? If yes child's name:

Please check times you are available for practice (please list a minimum of 4 times)

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 _____

APPLICATION CONTINUES ON THE BACK

Office Use (Please Initial): Form Complete_____

Please list three people besides relatives you have known for at least two years, and who know you well enough to provide us a character reference.

Name:	Phone:
Name:	Phone:
Name:	Phone:

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 ____

If yes, please explain: _____

I hereby certify under penalty of perjury that the answers given above are true and

Printed Applicant's Name:	Date:
Applicant's Signature:	Date:

Special Request and/or Concerns:

(i.e. Requests to coach more than one team, practice preferences, sponsor affiliation for your team, etc. Requests cannot be guaranteed however)

SKILLS EVALUATION & DRAFT FOR Coed 9-10
 Wednesday May 10th 5:00pm-6:30pm @ Lindquist Park
 Draft will immediately follow Evaluation.

SKILLS EVALUATION & DRAFT FOR Coed 11-13
 Thursday May 11th 5:00pm-6:30pm @ Lindquist Park
 Draft will immediately follow Evaluation.

SKILLS EVALUATION & DRAFT FOR Coed 14-16
 Friday May 12th 5:00pm-6:30pm @ Lindquist Park
 Draft will immediately follow Evaluation.

PRACTICE STARTS
 Week of June 1st

OPENING DAY / FIRST GAMES
 Saturday, June 10th

PICTURE DAY (no make-up pictures)
 Saturday, June 10th

Season runs through July!