



**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 11th @ 6:00pm. Meetings are held in the YMCA Board Room and last approximately one half hour. Please mark your calendars.

**Coach Meeting                      Wednesday, May  
 MANDATORY                      11th @ 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                      9-11                      12-15

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

**REQUIRED COACH MEETING**

*Meeting will be held at the YMCA in the Board Room and last approximately one-half hour.  
 Wednesday, May 11th @ 6:00pm*

**SKILLS EVALUATION & DRAFT FOR Coed 9-11**  
 Wednesday May 18th 5:00pm-6:30pm @ Lindquist Park  
 Draft will immediately follow Evaluation.

**SKILLS EVALUATION & DRAFT FOR Coed 12-15**  
 Thursday May 19th 5:00pm-6:30pm @ Lindquist Park  
 Draft will immediately follow Evaluation.

**PRACTICE STARTS**  
 Week of June 1st

**OPENING DAY / FIRST GAMES**  
 Saturday, June 11th

**PICTURE DAY** (no make-up pictures)  
 Saturday, June 11th

**LAST GAMES**  
**6-8 year old's:** Thursday, July 14th and/or Friday, July 15th  
**9-15 year old's:** Monday July 18th—Thursday July 21st (if necessary).