



# Volunteer Coach Application

If you are interested in coaching for the Sugar Grove Park District please complete this form. Applications are accepted once registration for the specific league opens.

Volunteer Coach's Name:		Sport Name:	
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Child's Name:		Age/Grade Level:	
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Street Address:			
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City:		Zip Code:	
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Home Phone Number:		Cell Phone Number:	
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Email Address:			
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I am interested in volunteering as a(n)  head coach  assistant coach.

Do you have any previous coaching experience?  Yes  No

If yes, please explain: \_\_\_\_\_

Have you ever coached for the Sugar Grove Park District?  Yes  No

If yes, what have you coached? \_\_\_\_\_

Have you had any formal training (clinics, coaching association memberships)?  Yes  No

If yes, please explain: \_\_\_\_\_

Please describe your coaching philosophy.

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What are your goals/objectives for the season?

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**\*Filling out this form does not guarantee a coaching position. Applications will be reviewed after registration has closed. The selected coach(es) will be contacted at least two weeks prior to the start of the program. If necessary, you may be contacted for an interview.**

**I have read and understand the above information:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_