

**YARMOUTH COMMUNITY SERVICES
VOLUNTEER COACH FORM**

Name: _____

Date of Birth: _____

Address: _____

Home Phone: _____

City/Zip: _____

Work Phone: _____

Email: _____

Coaching:

Sport(s) you wish to Coach: _____

Preferred age group/league desired: _____

Position Desired: Head Coach _____ Assistant Coach _____

Name the person you wish to coach with: _____ (He/She must also complete this form)

Your reason for volunteering: _____

Previous Experience:

Instructional Leadership of Children (explain): _____

Coaching Education: Courses _____ Clinics _____ Books _____ Videos _____

Other _____ (explain): _____

Coaching:	Sport	Year(s)	Agency
	_____	_____	_____
	_____	_____	_____

References:

Name	Address	Phone
_____	_____	_____
_____	_____	_____

I am aware that I will be subject to a Criminal Background Check.

Signature: _____ Date: _____

**Town of Yarmouth
Background Check Authorization Form**

I, _____, understand that in order to assess my qualifications for the position of volunteer coach, a full criminal background investigation is necessary. I, therefore, authorize the Town of Yarmouth/Yarmouth Community Services to conduct an investigation in order to obtain information concerning my criminal background.

I understand that a consumer report may be prepared summarizing the above information. I may request a copy of any report that is prepared regarding me from the consumer reporting agency and may also request the nature and substance of all information about me contained in the files of the consumer-reporting agency. I understand that proper identification will be required and that I should direct my request to:

**Equifax Credit Information Services, Inc
P.O. Box 740241
Atlanta, GA 30374**

I hereby release any individual, entity and the municipality from all claims of liabilities that might arise from the inquiry into or disclosure of such information, including claims under any federal, state, or local civil rights law and any claims for defamation or invasion of privacy.

All the information and materials I have provided to the Town of Yarmouth as part of the employment process are accurate and truthful. I realize that providing the municipality with false information or intentionally withholding relevant information regarding my application may be grounds for dismissal.

Applicant Name (Print) _____

Applicant Signature _____

Date of Birth _____

Drivers License Number _____

Today's Date _____