



### RETURNING Athletics Coaches Information Sheet

Position (Check One):  Head Coach  
 Asst. Coach

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

Sport(s): \_\_\_\_\_ Season (Circle One): Spring/Summer Fall Winter

#### Personal Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_  
*City* *State* *ZIP Code*

Home Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

#### Lakewood Recreation Coaches Information

Last Position Held: \_\_\_\_\_ Last Year Worked: \_\_\_\_\_

Sport: \_\_\_\_\_

#### Emergency Contact Information

Full Name: \_\_\_\_\_  
*Last* *First* *M.I.*

Address: \_\_\_\_\_  
*Street Address* *Apartment/Unit #*

\_\_\_\_\_  
*City* *State* *ZIP Code*

Primary Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

Relationship: \_\_\_\_\_

#### Volunteer Coach Agreement

My signature below acknowledges that all information I have provided on this information sheet and my original application is true, correct and complete. I will accept and fulfill all coaching responsibilities specified for each sport and abide by and enforce rules set forth by the Lakewood Community Recreation and Education Department. I also agree to allow publication of any photos taken of me at any program or event sponsored by the Lakewood Community Recreation and Education Department. I agree to maintain the following seasonal coaching requirements:

- Complete a new/returning coach application each season
- Obtain a background check at the Lakewood Recreation Department, valid for five years
- Attend a pre-season organizational meeting
- Abide by the Lakewood Community Recreation and Education Department Code of Ethics
- Maintain any required coaching certifications for my position (i.e. baseball Cal Ripken cert.)

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