

UPWARD BASKETBALL COACH AND REFEREE APPLICATION

Name:

Address:

Cell Phone: Email:

Date of Birth: Gender: M / F

Are you a member of a local church? Y / N If yes, where?

Mark which league you prefer to coach with a "C."

Division	Boys	Girls
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What is your PREFERRED practice day? (1st-2nd grades only)

Mon Thurs

What is your PREFERRED practice time?

What is your shirt size? (long sleeve dri-fit polo)

Men: S M L XL 2XL 3XL 4XL

Women: S M L XL 2XL 3XL

Please list your children who will be playing in this year's Upward Basketball league.

Child's Name	Grade	Gender	I plan to coach my child's team
.....	M / F	Y / N
.....	M / F	Y / N
.....	M / F	Y / N

WHAT IS YOUR LEVEL OF BASKETBALL PLAYING OR COACHING EXPERIENCE?

.....
.....

WHAT ONE WORD BEST DESCRIBES YOUR MOTIVATION TO COACH CHILDREN?

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I understand that I am applying for a role that will influence a child's spiritual development. With participants placed under my guidance, I commit to supporting the mission of the church/organization and providing a good example for the participants. If selected, I may be asked for further information to complete my application.

Signature: Date:

