

Please circle which you prefer:

Head Coach

OR

Assistant Coach



Youth Soccer League Coaching Application

Office Use Only:

Please be sure to fill in all of the lines. The information is necessary for our records.

\*Please make sure to fill out home, cell phone and e-mail as they will be primary contact information placed on the roster. PLEASE FILL OUT ONE FORM PER AGE GROUP YOU WILL BE COACHING.

Name: Home Phone\*:

Address: City: Zip:

Cell Phone\*: Work Phone:

E-Mail Address\*:

Child's Name: Child's Age: Grade:

Adult Shirt Size (Please circle one):

Adult Small

Adult Medium

Adult Large

Extra Large

Double Extra Large

Triple Extra Large

Have you been convicted of a felony within the last seven years? Yes No (As a volunteer coach applicant, I realize that I am subject to a background check done by Munster Parks and Recreation and the Indiana State Police.)

Initials

Date of Birth (mm/dd/yyyy)

Signature

Date

Do you have someone you wish to coach with?

Name

Phone Number

Shirt Size

1.)

2.)

Please list coaching experience:

Sport

Age Level

Years Coaching

1.)

2.)

Please drop off, fax (219) 836-6541, or mail this application to Munster Parks and Recreation, Attn: Skyler Ramberger, 1005 Ridge Road, Munster, IN, 46321.