

ARCHDIOCESE OF MILWAUKEE
COACHES AGREEMENT

Name: _____ Home Phone: _____ Cell Phone: _____

Address: _____ Date of Birth: _____

_____ Social Sec. Number _____

Coaching Experience: Sport(s): _____ Dates: _____

Are you certified as a coach or referee in any sport? _____
if yes, what? _____
when? _____

Have you undertaken a "coaching" seminar or course? _____
if yes, where & when: _____

Are you First-aid/CPR/AED certified? _____

Do you maintain a valid Wis. Drivers license? _____ License #: _____

Have you incurred any traffic citations in the last three years? _____
if yes, what & when: _____

Have you ever been convicted of, or pled guilty, or nolo contendere to, an offense, (including felony, misdemeanor or municipal ordinance) or are you now subject to a pending criminal charge?
___ Yes ___ No If yes, describe in detail on a separate piece of paper.

I _____ wish to participate in the sport of _____
_____ as a coach or coaches' assistant. I have reviewed the Archdiocesan rules and regulations for the previously mentioned sport and agree to abide by them.

I certify that the information provided by me above is true and complete to the best of my knowledge. I understand that if I am accepted as a coach, any false statements or omissions may lead to termination of my duties, and I agree that the parish/school shall not be held liable in any respect if my volunteer assignment is terminated for this reason.

I authorize the parish/school to verify the information stated above by means of a criminal records check. I agree to follow the policies of the Archdiocese and the parish/school, and I pledge to join with the church in its efforts to provide a safe and secure environment for our children and youth.

Signature

Date