



Page Youth Center
Basketball League
Coaching Application

Please fill out completely. Incomplete applications will not be accepted.

Head Coach

Assistant Coach

Please print or type.

Full Legal Name First Middle Last

Address City Zip

Home Phone Work Phone Cell Phone

Email Driver's License #:

Occupation Employer

If Coaching, Division desired: _____

Please note: Because the Page Youth Center desires to create parity within the league and the most competitive environment possible the matching of coaches and assistant coaches will NOT be predetermined prior to the draft.

Are you CPR Certified? Yes No If yes, expires: _____

Are you First-Aid Certified? Yes No If yes, expires: _____

Will you be coaching your child? Yes No If yes, player's name: _____

The following information will be used only for the purposes of confirming identification for the background check. The information provided will be kept in strictest confidence.

Date of Birth Last 4 digits of Social Security Number

Experience
PYC

Year	Division/Team

Other Youth Organizations

Year	Organization	Age Level	Position (s)

References

Name	Relationship	Phone

Criminal History

- Have you ever been convicted of a felony? Yes No
- Have you ever been convicted of a controlled substance offense? Yes No
- Have you ever been convicted of a sex-related crime? Yes No
- Are you required to register under section 290 of the California Penal Code? Yes No

If you answered Yes to any of the above questions, please explain on a separate sheet.

Agreement (please initial)

_____ I give my permission for PYC to conduct a background check on me, which may include (but is not limited to) a review of criminal records and sex offender registries.

_____ I understand that my approval as a coach is conditional upon the following:

- That no information is in my background check that may make me an inappropriate candidate for participation in a youth organization.
- That I attend the required evaluation, draft and coaches’ meeting.
- That I attend the required Positive Coaching Clinic when given.

_____ I understand that even if I am approved as a coach and have met all the conditions stated above, my coaching assignment is contingent on the number of teams formed and the number of coaches needed.

_____ I agree to abide by all codes of conduct, rules and policies as set forth by and not limited to the following:

- Page Youth Center (PYC)
- California Interscholastic Federation (CIF)

_____ I understand and accept that despite prior participation in PYC, the board of directors is not obligated to approve me for a coaching position.

_____ I hereby release and agree to hold harmless from liability the Page Youth Center and any of its officers, directors, and volunteers thereof, or any other person that may provide such information.

The information I have provided is true and complete to the best of my knowledge. I have read, understand and agree to the conditions stated above, and I understand that any false or misleading statements may lead to disqualification or dismissal.

_____ Applicant’s Signature

_____ Date