

Coaches Application

The Ferndale Youth Sports Board of Directors reserves the right to accept or reject any application. The Executive Board must approve all Coach and staff positions.

PERSONAL INF	FORMATION						
Full Name :							
Address:							
Cell Phone:		Email Address:					
Date of Birth :		Sport:					
Employer:		Age/Division:					
ALL APPLICANTS MUST MEET THE FOLLOWING BASIC REQUIREMENTS							
1. Coaches must agree with and abide by the rules of the Ferndale Youth Sports Code of Conduct and all							
additional leac	gue Code of Conducts.						
2. Applicant will read all FYS By-Laws and Handbooks as well as any other documents that may be presented							
from different	leagues.						
3. The applicant	is not listed on the Washingto	on Public Sex Offend	er Registry (Or any State R	egistry).			
4. The applicant	must not have been terminate	ed from a job or posit	ion of influence because of	f inappropriate			
treatment of c	hildren. This would include ar	ny type of job that inv	olves interaction with childr	en (i. e. Daycare			
provider, teac	her, gym instructor, Sunday s	chool teacher, Coach	ning, Scout leader, or as a v	volunteer).			
5. The applicant	must not have been convicte	d of a violent crime.					
6. The applicant	must have moderate knowled	dge of the sport apply	ring to coach, proper techni	ques, and			
fundamentals.	. They must be willing to get to	raining for this positio	n (i. e. coaching camps, bo	ooks, and/or			
videos) and ol	btain any certifications require	ed by FYS and addition	onal leagues.				
7. Agree to be a	n active participant in Ferndal	e Youth Sports Func	tions, board meeting and fu	ındraising events			
would like to be considered for: Head Coach Assistant Coach							
Do you have chi	ildren in the program?	Yes	No				
f yes, what are	their names:						
What division/age level will they play?							
revious Coaching Experience (Please include organization, year, position, etc):							

Name: Name: Name: Under Youth a Back	erstand that the Ferndale Youth S	Phone: Phone: Phone: Phone: Phone: Phone: Output Sports Program is interested in the sports. According to accepting me for a coal	ed in providing a safe, wholesome exp gly, I hereby consent to Ferndale Youth	perience for all of the
Coach Name : Name : Name :	•	Phone: Phone: Phone:	ave assist you, if you are app	Dlying for Head
Coach Name : Name :	•	Phone:	ave assist you, if you are app	Dlying for Head
Coach	•	Phone:	ave assist you, if you are app	Dlying for Head
Coach	•		ave assist you, if you are app	olying for Head
	•	-	ave assist you, if you are app	lying for Head
5. How	do you plan on meeting t	the required playing	time for each athlete?	
4. Wha	at is your feeling on being	required to attend	leauge/board meetings?	
 3. Wha	at specific skills will you to	each and what meth	ods will you use?	
2. Wha	at is your Coaching/mana	ging Philosophy and	d Style?	
	y do you want to Coach o	r participate with Fe	rndale Youth Sports?	
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Ad	dress:			
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Na				
	dress:			
Ad	me : dress:	r	hone:	

All information on this application will be kept private and confidential. It will only be used for the purpose of filling coaching positions within the Ferndale Youth Sports Organization.

COMPLETION OF THIS APPLICATION DOES <u>NOT</u> GUARANTEE A TEAM/SQUAD