



# Sebastian Sharks Youth Football and Cheerleading Association 2019 Volunteer Coach /Assistant Coach Application

To Be Completed By All Head and Assistant Coaches of SSYFCA

**PERSONAL INFORMATION**

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Full Legal Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Male / Female (please circle one) SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Other Names (maiden, alias, etc.): \_\_\_\_\_

Driver's License No.: \_\_\_\_\_ DL State: \_\_\_\_\_ DL Expiration: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

*\* A copy of a valid government issued photo ID must be attached to complete this application.*

Email address: \_\_\_\_\_

Home Phone No.: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone No: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Home Address (list all for the past 7 years, include dates): \_\_\_\_\_

*\* please attach a separate sheet if additional space is needed*

Have you ever been convicted of a crime? Yes / No

If yes, please list all misdemeanor/felony offenses (state/date/nature of charges/disposition): \_\_\_\_\_

Have you ever been refused participation in any youth sports program? Yes / No

If yes, explain: \_\_\_\_\_

**CONSENT/RELEASE**

I authorize and give consent for SSYFCA or League Designee referenced above to obtain my personal information. This includes, but is not limited to criminal background records/information; criminal background checks; coaching experience, personal references, and addresses. I authorize this information to be obtained either in writing, via internet, or via telephone in connection with my volunteer application. I understand that my position is contingent upon adverse information about my background or character not being uncovered upon the performance of the above referenced checks. I also understand that regardless of my prior volunteer activities on behalf of the SSYFCA or League, that the SSYFCA is not required to allow my continued participation. I agree to hold harmless and indemnify from liability the SSYFCA and its directors, officers, and volunteers from all liability arising out of the use of the information that is uncovered in the above referenced checks.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**FOR SPORTS ORGANIZATION USE ONLY**

Background checks completed through SSCI by \_\_\_\_\_ (name) on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (date).

Sources Checked:

- Pass
- Fail (keep this form and the record check on file for 15 years if failed)

League President Signature: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_



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## WAIVER OF LIABILITY, RELEASE

For and in consideration of the undersigned participant's registration with Sebastian Shark Youth Football and Cheer Association ("Organization") and being allowed to participate in events and member activities, participant and the parent(s) or legal guardian(s) of participant waive, release and relinquish any and all claims for liability and cause(s) of action, including for personal injury, property damage or wrongful death occurring to participant or participant's parent(s) or legal guardian(s) arising out of participation in events, or sports, and/or activities incidental thereto, whenever or however they occur and for such period said activities may continue, and by this agreement any such claims, rights, and causes of action that participant and/or participant's parent(s) or legal guardian(s) may have are hereby waived, released and relinquished, and participant and participant's parent(s)/guardian(s) do so on behalf of their heirs, executors, administrators and assigns.

Participant and participant's parent(s)/guardian(s) acknowledge, understand and assume all risks relating to events or sports participation and activities incidental thereto, and understand that activities incidental thereto involve risks to participant's and participant's parent(s)/guardian(s) person including bodily injury, partial or total disability, paralysis, death, and damages which may arise there from and that we have full knowledge of said risks. These risks and dangers may be caused by the negligence of the participant, participant's parent(s)/guardian(s) or the negligence of others, including the organization, its affiliates, members, event hosts, other participants, other parents and legal guardians, coaches, officials, sponsors, advertisers, owners and operators of the premises used to conduct any event and each of them, their officers, directors, agents and employees (collectively, "releasees"), and include risks arising from the conditions and use of facilities and related premises. I/We further acknowledge that there may be risks/dangers not known to us or not reasonably foreseeable at this time.

Participant and participant's parent(s)/guardian(s) acknowledge, understand and assume the risks, if any, arising from the conditions and use of facilities and related premises, whether as a participant or a spectator, including without limitation, the risks involved with participating in the Organization's activities. Participant and participant's parent(s)/guardian(s) further acknowledge and understand that included within the scope of this waiver and release is any cause of action (including any cause of action based on negligence) arising from the performance, or failure to perform, maintenance, inspection, supervision or control of said areas and for the failure to warn of dangerous conditions existing at said facilities, for negligent selection of certain releasees, or negligent supervision or instruction by releasees.

Participant and participant's parent(s)/guardian(s) acknowledge, understand The Organization reserves the right to photograph facilities, activities and program participants for potential future use. All photos remain the property of the Organization and may be used for publicity and promotional services.

Consent to Medical Treatment of Minor: I hereby give my consent to have the above applicant treated by a physician or surgeon in case of sudden illness or injury while participating in the above event. It is understood that the Organization provides no medical insurance for such treatment under its liability insurance coverage. Medical benefits for such treatments/injuries may be provided with proof of medical coverage purchased through the Organization. The location of the activity or the nature of the illness or injury may require the use of emergency medical personnel.

Participant and participant's parent(s)/guardian(s) agree if any claim for personal injury or wrongful death is commenced against releasees, he/she shall defend, indemnify and save harmless from any and all claims or causes of action by whomever or wherever made or presented for his/her personal injuries, property damage or wrongful death.

Participant and participant's parent(s)/guardian(s) acknowledge that they have been provided and have read the above paragraphs and have not relied upon any representations of releasees, that they are fully advised of the potential dangers and risks and understand these waivers and releases are necessary to allow the activities of the Organization to exist in its present form.

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**Volunteer / Participant Signature**

**Date Signed**

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**Volunteer / Participant Name (Printed)**

**Age (if under 18)**

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**Parent/Guardian Signature (for volunteers under 18)**

**Date Signed**



# Sebastian Sharks Youth Football and Cheerleading Association 2019 Volunteer Coach /Assistant Coach Application

## QUALIFICATIONS:

What program(s) would you like to be considered for? (please circle all that apply)

**Spring:** Head Coach / Assistant Coach

Tackle Football      Flag Football      Cheerleading      Competition Cheer

**Summer:** Head Coach / Assistant Coach

NFL Flag Football      NFL Cheer

**Fall:** Head Coach / Assistant Coach

Tackle Football      Flag Football      Flag Cheer      Competition Cheer

What team / age groups are you interested in? (please circle all that apply)

Jr Rookie- 7    Rookie- 8    Mighty Mites- 9    PeeWee- 10    Bantams- 11    Juniors- 12    Seniors- 13/14

If applying for a head coach position and not selected, are you interested in an assistant coach position?

(check which applies)     Yes, in the same division     Yes, in another division     Not interested

Have you ever coached in a youth sports program?    Yes / No

If yes, please advise what capacity/age group: \_\_\_\_\_  
\_\_\_\_\_

Have you ever received disciplinary action while coaching in a youth sports program?    Yes / No

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

Do you have a child / children in the program?    Yes    or    No

If yes, what age(s) and team(s): \_\_\_\_\_

Why do you want to be a volunteer? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What are your qualifications as a coach? (attach a separate sheet if needed): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



## Sebastian Sharks Youth Football and Cheerleading Association 2019 Volunteer Coach /Assistant Coach Application

### RESPONSIBILITIES AND COMMITMENT:

- 1) All coaches must complete the application process as outlined in the standing rules.
- 2) All head coaches must be twenty-one (21) years of age, have one (1) year of coaching experience in their respective field, unless otherwise approved by the BOD, and will be selected by BOD vote.
- 3) All Head coaches are responsible for recruiting, selecting and supervising assistant coaches and team parents.
- 4) All assistant coaches are subject to BOD review with right of refusal.
- 5) All coaches are under the direct supervision of their respective director.
- 6) All coaches must complete training and certifications required by governing bodies.
- 7) All head coaches are responsible for ensuring at least one approved coach (18 or older) is present at all times during practice/games. Junior assistant coaches should be age appropriate for the division they are assisting.
- 8) All head coaches are responsible for athletes under their care, ensuring badged supervision, until all athletes have left the field.
- 9) All head coaches are responsible for ensuring that injury forms are completed and given to the Player Safety Officer for onsite filing.
- 10) All head coaches are responsible for ensuring that any player that has been injured does not return to field until cleared by the SSYFCA Player Safety Officer.
- 11) All head coaches are responsible for advising the Secretary if an athlete has dropped from the roster.
- 12) All coaches are responsible for equipment checks and making sure that players are properly outfitted for practices and games and that all safety standards are met routinely
- 13) All coaches are responsible for ensuring athletes are properly hydrating during team activities.
- 14) All head coaches are responsible for issued equipment in their coach's bag, and must return all equipment immediately at the end of the season.
- 15) All head coaches are responsible for assisting with the return of all team equipment at BOD scheduled time.
- 16) All head coaches will agree to implement and utilize the standard plays provided by the tackle director, and incorporate them into their practice routine; by the third game.
- 17) All Head coaches are responsible for tracking that all players have played the mandatory number of plays using the league provided form, unless disciplinary actions are being enforced and a copy of the discipline form is on file with the appropriate director and President and/or Vice president is aware. The completed play tracking form must be turned in to the tackle director at the following practice.
- 18) The head coach must present, when asked, their team's practice plan. If the head coach is unable to provide any of the above, the director may assist in developing what is missing and implementing as needed.
- 19) All head coaches shall make every attempt to resolve disputes and problems with players or parents. Any disputes which cannot be resolved by the head coach shall be reported to the respective director.
- 20) All coaches are expected to get involved with events sponsored by or involving their team and participate in league events/fundraisers.
- 21) Conduct that is deemed by the BOD as detrimental to the best interest of the SSYFCA or other rule infractions shall be subject to discipline, suspension, or termination of the membership of any league participant.
- 22) The use of alcohol and/or drugs or being under the influence of alcohol and/or drugs while working with children will not be tolerated and will be grounds for suspension or dismissal from the League.
- 23) Abusive language, physical abuse or violence of any kind while working directly with the players/cheerleaders will not be tolerated and will be grounds for suspension or dismissal from the league.
- 24) Violation of any of the aforementioned rules, or any other behavior determined by the BOD to be detrimental to the league, will result in a BOD review and could lead to immediate dismissal from the position and/or the SSYFCA.

*I have read all of the above and fully understand and agree to abide by my obligations.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Printed: \_\_\_\_\_

Team: \_\_\_\_\_