

CENTRAL SQUARE YOUTH LACROSSE PROGRAM

Volunteer Youth Coach Application

Coach / Volunteer Information

Full Legal Name _____

Date of Birth: _____ Drivers License # _____

Previous (or Maiden) Name: _____

Current Address: _____

City State Zip Code: _____

Home Phone () _____ Alternate Phone: () _____

SUNY YSI Member Number Other Certification(s) _____

First Aid Training: Yes / No

CPR Training: Yes / No

Have You Played This Sport? (When, where, at what level?) _____

How would you describe yourself as a youth sports coach? _____

What is your coaching philosophy? (Winning, having fun, discipline, team work, etc...) _____

Are you willing to take direction from the Recreation Supervisor or Coaching Supervisor/Coordinator?

(What drills to use, advice in game situations, working as a team with the other coaches, etc?)

Circle... Yes / No

Are you willing to enforce and promote the CSYLA Code of Ethics for Coaches, Players, and Parents? Circle... Yes / No

Coach / Volunteer Application

Background Screening Application

Central Square Volunteer Coach Application

All volunteers or employees whose position requires routine access to children must be screened by CSYLA *Central Square, NY*. Your signature on this application signifies that you agree to allow CSYLA, *Central Square, NY* or an assigned agency to perform a criminal background screening. This screening will include a review of sex offender registries, child abuse, and criminal history records. I hereby release and hold harmless from liability CSYLA, *Central Square, NY*, the officers, employees, agents, volunteers thereof, and any other person or organization that may provide such information in accordance with the laws of the United States. I further understand that previous acceptance as a CSYLA, *Central Square, NY* Youth Coach/Volunteer does not obligate CSYLA, *Central Square, NY* or its local Association, to accept my current application.

I. I have not been convicted (including crimes the record of which has been expunged or pleas of “no contest”), disciplined, or discharged from employment for committing or attempting to commit crimes in the area of:

- Child abuse • Sexual abuse of a minor • Physical abuse
- Murder • Manslaughter • Felony assault
- Kidnapping • Arson • Criminal sexual conduct
- Neglect of a child • Abuse causing a child’s death • Prostitution related crimes
- Child pornography • Child exploitation • Controlled substance crimes
- Juvenile prostituting or pimping

II. I have not been convicted of any offense in any other state or against the laws of the United States which if committed or attempted in this state would have been punishable as one or more of the foregoing enumerated offenses.

III. I have not been adjudged liable for civil penalties or damages involving sexual or physical abuse of children.

IV. I have not been subjected to any court order involving any sexual abuse or physical abuse of a minor, including but not limited to domestic order for protection.

V. I have not ever had my parental rights terminated.

VI. I understand that I have an ongoing obligation as a volunteer of this organization to promptly report any conviction in those areas described above. (If you have committed or attempted to commit any of these crimes, please explain the circumstance related to the situation on a separate sheet of paper.)

By signing the application you are designating that all of the above statements are true and correct.

Signed: _____

Date: _____