

Coach/Volunteer Application

Full Legal Name _____

Previous (or Maiden) Name _____ Date of Birth ____/____/____

Current Street Address _____

City _____ State _____ Zip Code _____ County _____

Phone #(_____) _____ Phone #(_____) _____ Shirt Size: S, M, L, XL, XXL

Email _____

Qualifications

(only coaches fill out this portion)

1. Please circle the sport(s) you would like to coach: Baseball/Softball, Soccer, Basketball
2. Is this your first year coaching for Lamoni Parks and Recreation? YES NO
3. Years of coaching experience? _____
4. Coaching certifications? _____
5. Other sports coached? _____
6. Are you willing to coach more than one team at a time? YES NO
7. Are you willing to coach a team your child is not on? YES NO

Liability and Photo Release

In consideration of Lamoni Parks and Recreation programs, I hereby apply to participate in such program. The undersigned hereby agrees not to sue the incorporated City of Lamoni, any subdivision thereof, members of the city government, city employees, and city commission or board, its members, employees, or any other person participating in the administration of the recreation program. On account of any claim arising directly or indirectly with regarding to my participation in said recreation program, not limited to, but known in law; not will (I) (We) permit any other person not a party to this registration to institute or prosecute such claim on my behalf.

I hereby grant The City Of Lamoni, its legal representatives and assigns (including but not limited to), clients, publications and agencies, permission to publish photographs/images of me in any manner, including (but not limited to); internet web publications and/or pages, calendars, advertisements, periodicals and greeting cards. I will hold harmless the aforementioned photographer and his/her legal assigns and representative, from any liability by virtue of distortion or alteration, unless it can be proven that such alterations and or distortions were done with malicious intent.

I do attest that I am the below named, and have legal authority to sign this release. I have read and fully understand the contents of this release, and consent to the use of said photographs based on the contents thereof.

Type or Print Name _____

Applicant Signature _____ Date ____/____/____

Background Screening Acknowledgement

It is the desire of the Lamoni Park and Recreation Commission to protect all children who enter our recreational programs in the City of Lamoni, Iowa. Therefore, the commission members do require that all volunteer coaches and employees of the park, recreation, and pool sign a release form. Each volunteer and employee of the commission shall be entered into the Iowa Division of Criminal Investigation and the Iowa Central Abuse Registry.

I hereby give permission for the above requesting agency to conduct a criminal history record check with the Iowa Division of Criminal Investigation and the Iowa Central Abuse Registry. I authorize the Department of Public Safety and the Department of Human Services to release any information relevant to any conviction of a crime to the Lamoni Park and Recreation Commission.

Type or Print Name _____

Applicant Signature _____ Date ____/____/____