

Upward Flag Football & Cheerleading

YES, I will help referee Upward Flag FB

Coach and Referee Application

YES, I plan to coach Upward Flag FB

Section 1

Name _____ Phone(W) _____

Home Address _____ Phone(H) _____

City _____ State _____ Zip _____

Place of Employment _____ Date of Birth _____

Email Address _____

Do you know someone who might be interested in coaching Upward Football this year?

1. Name _____ Phone _____ 2. Name _____ Phone _____

3. Name _____ Phone _____ 4. Name _____ Phone _____

SECTION 2 (please circle)

1. What is your shirt size? MEN: S M L XL XXL XXXL

WOMEN: S M L XL XXL XXXL

2. What is your preferred practice day? M T Th F

3. What is your preferred practice time? 4pm 5pm 6pm 7pm 8pm

4. Please list your children who will be playing in this year's Upward League, if applicable.

Child's Name	Grade	Gender	I plan to coach my child's team	
_____	_____	M/F	Yes	No
_____	_____	M/F	Yes	No
_____	_____	M/F	Yes	No

5. Mark which league you prefer to coach with "C." Mark which league you prefer to referee with an "R." Which evaluation night Will you attend?

League	Boys/Girls	Evaluation	
Kindergarten	Co-Ed	Date:	Time:
1st & 2nd Grade	___/___	Date:	Time:
3rd & 4th Grade	___/___	Date:	Time:
5th & 6th Grade	___/___	Date:	Time:
7 th - 12 th Grades	___/___	Date:	Time:

6. Please note that the Coaches Training on August 12, 2017 from 9:00-12:00 is mandatory

7. Have you ever coached Upward Flag FB before? Yes No

8. Have you ever refereed Upward Flag FB before? Yes No

9. Are you a member of a local church? Yes No If yes, where? _____

10. Have you made a personal commitment to Jesus Christ? Yes No

Please share a little about your relationship with Jesus, (please feel free to use the back of this sheet if you need more room)

I understand that any negative personal habits that I have (smoking, alcohol, profanity, etc.) may have a negative effect on a Childs spiritual development Understanding that the children on my team have been placed under my guidance, commit to setting a worthy behavioral example for them to look to.

Coach's Signature _____ Date _____

COACHES INQUIRY RELEASE

In conjunction with my application for appointment to coach UPWARD Flag Football or UPWARD Cheerleading at Tri County Baptist Church, understand that you intend to hire LexisNexis to obtain Consumer Reports and/or Investigative Consumer Reports (here in after called "Reports"), These "Reports" may include information concerning my character, general reputation, and/or criminal record.

I understand that you may rely on any or all the above referenced information in determining whether to extend an offer of appointment to me to coach UPWARD Flag Football or UPWARD Cheerleading. If you contemplate making an adverse appointment-related decision that will affect me based, in whole or in part, upon a "Report" obtained from LexisNexis, will be provided with a copy of the "Report" upon request.

I have read the above disclosure and I hereby authorize you, LexisNexis or its authorized agents to obtain the above referenced information about me. I also authorize all agencies, bureaus, employers, information service organizations and individuals to provide any of the above referenced knowledge or information they have concerning me. If am appointed, this authorization shall remain on file and shall serve as an ongoing authorization for you to obtain "Reports" about me from LexisNexis at any time during my appointment with you. A photocopy or facsimile of this authorization shall be as valid as the original.

THE FOLLOWING INFORMATION IS REQUIRED TO CONDUCT THE BACKGROUND INVESTIGATION

PRINT NAME: _____
Last Name First Name Middle Initial Social Security Number

PREVIOUS OR MAIDEN NAME (if applicable): _____ PHONE NUMBER: _____

STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

FOR IDENTIFICATION PURPOSES ONLY: Date of Birth (Month/Day/Year) _____

I promise the information I provide on this form is true and correct. I understand that dishonesty will disqualify me from consideration for appointment as team coach for UPWARD Flag Football or UPWARD Cheerleading.

Signature: _____ Date: _____

Please mail to Tri-County Baptist Church, Attn: Upwards, 8195 Beckett Rd, West Chester, OH 45069
(or) Hand in at the Coaches Meeting Before the FIRST PRACTICE!