BEDFORD COMMUNITY EDUCATION
COACHING FORM

Name of Sport: _____ Season _____ (F,W, Sp, Su)

Grade Level: Pre ___ K-1 ____ 2-3 ____ 4-5 ____ 6-8 _____ 9-12 _____

I would like to (circle one): Coach _____ Assistant Coach _____

I have experience in this sport (either played or coached) _____

Your First Name _____ Middle Initial ____ Last Name _____

Home Address _____
(include city and zip)

Email Address _____

Home Phone _____ Cell Phone _____ Text (Y/N) ____

Best time of the day to reach you: If work, please include work number _____

Name of child you wish to coach _____

Person you with to coach with _____

Please mark preferences: Practice Days _____ Times: _____

Are you able to attend the coaches meeting _____

Coach shirt size: ◯ (34-36) ◯ (38-40) ◯ (42-44) ◯ L (46-48) ◯ XL (50-52) Other ___

Please note: For the safety of our players, all coaches and assistants undergo a background check. This information will remain confidential and not used for any other purpose. This information will be shredded at the end of the season. Please fill in the information below:

Have you ever been convicted of a felony crime? ☐ Yes ☐ No
Have you ever been convicted of a misdemeanor involving children? ☐ Yes ☐ No

Driver's License Number _____ Date of Birth____/____/____

Please return the completed form to the

Community Education Office

Smith Road School, 1135 Smith Road Temperance, MI 48182