

COACH & ASSISTANT COACH

Volunteer Application

Contact:

shelby@beltonyouth.com

Belton Christian Youth
Center
505 E. Avenue C
Belton, TX 76513
(254) 939-5759

As a BCYC Volunteer Coach or Assistant Coach I agree:

- 1. To completely fill out and submit the BCYC background check and application.
- To provide and encourage leadership by following ALL league rules, bylaws, constitutions, etc.,
 especially those concerning player participation, coach conduct and sportsmanship.
- 3. To abide by all BCYC policies, procedures and facility rules.
- 4. To properly maintain and return team equipment.
- 5. To display respect to BCYC staff, official(s) and score keeper(s) at all times.
- 6. To be responsible for the conduct of his/her team, assistant coaches and spectators.
- 7. To ensure a safe and supportive environment for all youth playing sports.
- 8. To be punctual and in attendance to all scheduled games and practices provided by BCYC.

*By signing this you are agreeing to all terms and conditions as listed above and assigned by BCYC staff. By violating any of the above terms and conditions you may be subject to removal or other disciplinary actions at the discretion of BCYC Staff.

Printed Name:	Date:	_
Signature:		
Parent Signature (if under 18):		

BELTON CHRISTIAN YOUTH CENTER

Volunteer Application

	Ау	rea(s) of Interest (circle one):	:	
	Coach		Assistant Coa	nch
Name:				
(First)		(Middle Initial)	(Last)	
Date of Birth(n	nm/dd/yyyy)			
Driver's License #:		State:Ge	ender: M F	Race:
Street Address:		City:		Zip:
Home Phone #: ()	Work Phone #:	()
Cell Phone #: ()	T-Shirt Size: S	M L XL	XXL other:
		T-Shirt Size: S		
E-Mail Address: Emergency Contact I	Information:			
E-Mail Address: Emergency Contact I Name:	I nformation: Phon		Relati	
E-Mail Address: Emergency Contact I Name: INFORMATION REQU	Information: Phon Place FOR COACH	ne #: ()	Relati	onship:
E-Mail Address: Emergency Contact I Name: INFORMATION REQU Division Interest:	Information: Phon Place FOR COACH	ne #: () HES & ASSISTANT COACHE	Relati S:: Basketball	onship:
E-Mail Address: Emergency Contact I Name: INFORMATION REQU Division Interest: Child's Name:	Information:Phon JIRED FOR COACHFootball	ne #: ()	Relati S S: Basketball rade:	onship:Soccer
E-Mail Address: Emergency Contact I Name: INFORMATION REQU Division Interest: Child's Name: Do you have an Assista RELATED EXPERIENCE Please list in chronologi	Information: Phon Phon JIRED FOR COACH Football ant Coach? Y N cal order (beginning	ne #: ()	Relati Sasketball rade:	onship:Soccer



BACKGROUND POLICY AND RECORDS CHECK

All volunteers of the Belton Christian Youth Center, (BCYC), agree that background checks can include but are not limited criminal background check, arrest records, or abuse registry check. BCYC policy states that, whenever possible, this permission form, along with any additional applications and other specified documents/releases must be signed and returned to the BCYC office before the applicant is allowed to come into contact with youth members. Each applicant is requested to detail any/all anticipated entries that might return on their record voluntarily while application is being completed.

With your signature below, you authorized BCYC to perform a background and records check to help determine the feasibility of your being allowed to volunteer with BCYC. I also agree that background and records checks may be done annually, as long as I am a volunteer with the BCYC.

Note: Applicants with sex and/or drug related offenses on their records are normally automatically disqualified				
Social Security # _	-	-		
ENTRIES THAT I ANTICIPATE BEING LISTED IN MY RECORD CHECK				
OFFENSE	DATE	MANNER OF DISPOSITION/PUNISHMENT		
You may use the ba	ack of this form to add any	details you feel important and beneficial to club volunteers.		
, ,	*	, without recourse, to conduct a criminal background check, arrest urposes of my volunteer services.		
Signature of Volum	teer	Date		