

COACH FORM

I would like to coach a team in the Branlyn Neighbourhood Association Softball Program. I understand that there are certain time requirements and patience required for coaching. I also understand that as a coach I will hold regular practices, give instruction in sportsmanship and fair play, and attend all games.

NAME: _____

ADDRESS: _____

E-MAIL: _____

PHONE: _____

AGE: _____

SHIRT SIZE: _____

I would like to volunteer for community service hours.

TBALL 4-5 years

JR ROOKIE 6-7-8 years

ROOKIE 9-12 years

YOUTH 13-17 years

ADULT 18 and over

SPECIAL REQUESTS: _____

DISCLAIMER

I consent to the participation of my own participation in the Branlyn Neighbourhood Association league as outlined above. I will not hold the Branlyn Neighbourhood Association, any of its members or executive or the Brantford Parks and Recreation Department liable for any injury sustained while participating in sports activities or any activities associated with this registration. My signature acknowledges that I am 18 years of age or older and have read and agree to the above conditions as written, for the Branlyn Neighbourhood Association and Brantford Parks and Recreation Department.

SIGNATURE: _____ **DATE:** _____

The Association reserves the right to reject any applicant for this position in the Branlyn Neighbourhood Association Baseball League. All coaches must be 18 or older. Assistant coaches can be under 18 if working with an adult coach.