



Davidson County Parks and Recreation Department  
310 East Center Street  
Lexington, NC 27293  
Phone: (336) 242-2286 Fax: (336) 242-2254

### Volunteer Coach Application

Booster Club Affiliation: \_\_\_\_\_

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Have you ever volunteered for the Davidson County Recreation and Park Department before? Yes \_\_\_ No \_\_\_ If yes, when:

In what capacity? \_\_\_\_\_

Have you ever been convicted as an adult for a violation of the law? Yes \_\_\_ No \_\_\_ If yes, please explain in detail:



Coaching Preference  
(Check All That Apply)

Boys \_\_\_\_\_ Girls \_\_\_\_\_

Sports:

FOOTBALL

Pee wee

Little League

SOCCER

6U

8U

10U

12U

14U

BASKETBALL

Instructional

Little League

Junior

Senior

BASEBALL

9-10

11-112

13-14

SOFTBALL

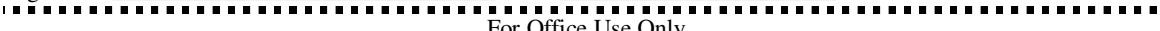
9-10

11-12

13-14

By my signature below, I verify that information I have provided is true and complete. I also confirm that I will notify and update the Davidson County Recreation and Parks Department of any changes to the information provided. I further authorize the Davidson County Recreation and Parks Department to conduct a criminal background check with the complete understanding that all information provided by me will be kept confidential.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



For Office Use Only

Background Screening Completed: \_\_\_\_\_ Application \_\_\_ Accepted \_\_\_ Denied