



Davidson County Parks and Recreation Department  
555-D West Center Street Extension  
Lexington, NC 27293  
Phone: (336) 242-2286 Fax: (336) 236-7530

**Volunteer Coach Application**  
(Please print or type, must be a to read or application will be returned)

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

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ (As appears on Driver License)

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:

- |  |                              |  |                              |                              |  |
|--|------------------------------|--|------------------------------|------------------------------|--|
| <b>FOOTBALL</b>                        | <b>SOCCER</b>                | <b>BASKETBALL</b>                      | <b>BASEBALL</b>              | <b>SOFTBALL</b>              | <b>Volleyball</b>                      |
| <input type="checkbox"/> Pee wee       | <input type="checkbox"/> 6U  | <input type="checkbox"/> Instructional | <input type="checkbox"/> 6U  | <input type="checkbox"/> 6U  | <input type="checkbox"/> Little League |
| <input type="checkbox"/> Little League | <input type="checkbox"/> 8U  | <input type="checkbox"/> Little League | <input type="checkbox"/> 8U  | <input type="checkbox"/> 8U  | <input type="checkbox"/> Junior League |
|  | <input type="checkbox"/> 10U | <input type="checkbox"/> Junior        | <input type="checkbox"/> 10U | <input type="checkbox"/> 10U |  |
|  | <input type="checkbox"/> 12U | <input type="checkbox"/> Senior        | <input type="checkbox"/> 12U | <input type="checkbox"/> 12U |  |
|  | <input type="checkbox"/> 14U |  | <input type="checkbox"/> 14U | <input type="checkbox"/> 14U |  |

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