



Hayden Parks and Recreation

Active Lives ~ Healthy Lifestyles

Kathy Hockett, Director
PO Box 1059
Hayden, CO 81639
970-734-4168
Fax 970-276-3644

VOLUNTEER / COACH APPLICATION

MAIL TO: PO Box 1059 HAYDEN, CO 81639 OR DROP OFF AT THE HAYDEN TOWN HALL AT 178 W. JEFFERSON AVE. OR THE DRY CREEK PARK BUILDING AT 513 S. POPLAR ST. INFO: CALL 970-734-4168

In an effort to keep our participants safe and provide them with the best recreational experience possible, we have established a volunteer application process. Application must be filled out completely & legibly. Please PRINT or type.

NAME _____

LAST

FIRST

MIDDLE

PHYSICAL ADDRESS _____

STREET

CITY

STATE

ZIP CODE

MAILING ADDRESS _____

PO BOX/OTHER

CITY

STATE

ZIP CODE

PHONE NUMBERS _____

HOME

WORK

CELL/OTHER

E-MAIL ADDRESS _____ GENDER _____

COACHING REQUEST & EXPERIENCE:

Sport you wish to coach _____ Preferred Age/Gender Group _____

Position Desired: Head Coach Assistant Coach Other: _____

Reason for applying: _____

PREVIOUS EXPERIENCE

Instructional Leadership of children (explain): _____

COACHING EXPERIENCE

Sport	Year/s	Organization/Phone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

CERTIFICATIONS CPR Certified _____ Expires _____ First Aid Certified _____ Expires _____

Brief Coaching Philosophy for sport and age you are applying for:

PRIMARY EMERGENCY CONTACT INFORMATION – PARENT/GUARDIAN (UNDER 18):

VOLUNTEER/COACH NAME _____

PRIMARY CONTACT NAME _____ RELATIONSHIP _____

FIRST LAST

PHONE #1 _____ PHONE #2 _____ PHONE #3 _____

HOME WORK CELL/OTHER

ALTERNATE CONTACT NAME _____ RELATIONSHIP _____

FIRST LAST

PHONE #1 _____ PHONE #2 _____ PHONE #3 _____

HOME WORK CELL/OTHER

VOLUNTEER HEALTH CONCERNS OR OTHER INFORMATION YOU FEEL MAY BE IMPORTANT IN CASE OF A MEDICAL EMERGENCY
(i.e. ALLERGIES, DIABETIC, EPILEPSY, HIGH BLOOD PRESSURE, HEART MURMUR, ETC.)

PHYSICIAN _____ PHYSICIAN PHONE _____

DENTIST _____ DENTIST PHONE _____

EDUCATION

HIGH SCHOOL _____

COLLEGE _____

CURRENT EMPLOYER

NAME _____

ADDRESS _____ PHONE _____

POSITION _____ SUPERVISOR _____

DUTIES _____ START DATE _____

CONTACT FOR REFERENCE (CIRCLE) YES NO

VOLUNTEER COACHING CODE OF CONDUCT

GET INVOLVED IN A POSITIVE WAY!

1. I WILL emphasize that having fun and doing one's best is more important than winning or losing. I will keep winning and losing in perspective and help my team to do the same.
2. I WILL encourage my team to play by the rules. I will remember children learn best by example, so I will applaud the good plays of both teams.
3. I WILL cheer positively for my team and team members.
4. I WILL not embarrass any team member, parent, or coaching staff.
5. Profanity, personal criticism and abusive language or conduct has no place on or off the court. Misunderstandings and differences do occur. Sports are not without close calls. The solution is not "unbecoming" conduct. **Under no circumstances will I physically touch in an unbecoming manner a team member, parent, referee, or official or engage in any unsportsmanlike conduct.**
6. I WILL help my team members and parents to understand the valuable lessons sports can teach:
 - Acquiring an appreciation for an active lifestyle
 - Developing a positive self-concept by mastering sports skills
 - Developing social skills with other children and adults
 - Learning about managing success and disappointment
 - Learning respect as individuals and for others
7. I WILL refrain from coaching other teams' players during games.
8. I WILL remember that I set the tone for the team. If I want my team to be fair and understanding, I must be as well. I recognize that the team members, parents, coaching staff, and the officials need positive support.
9. I acknowledge that the supervisory staff (including referees) has the authority to enforce the rules and regulations of the sport and to assess any penalties and/or suspensions described herein. In addition, the supervisor has the authority to make decisions on situations not specified in the rules and regulations.
10. Participation in an athletic program is a privilege, which may be denied or suspended for violation of the rules and regulations.
11. Unsportsmanlike conduct, disrespect to coaches, parents, referees, teammates, opposing players or fans, may be cause for my immediate ejection.
12. Individuals, players, coaches, or spectators ejected must leave the facility/grounds immediately. Failure to do so in a timely manner may result in forfeiture of the game.
13. If I fail to abide by the aforementioned rules and guidelines, I will be subject to disciplinary action that could include, but is not limited to the following:
 - o Verbal warning by official, coach, and/or head of league organization
 - o Game suspension with written documentation of incident kept on file at Hayden Parks & Rec.
 - o Game forfeit through the official
 - o Season suspension

If you need to report an incident or assistance is needed, you may contact the Hayden Parks & Recreation Office during business hours at 970-734-4168. After hours, contact the local police department at 276-2535.

REFERENCES – (NAME, RELATIONSHIP, CONTACT PHONE NUMBER)

1. _____
2. _____
3. _____

BACKGROUND CHECK & LIABILITY RELEASE:

FULL PRINTED NAME _____

LAST FIRST MIDDLE

FULL PHYSICAL ADDRESS _____

STREET ADDRESS CITY STATE ZIP CODE

SOCIAL SECURITY NUMBER _____ DATE OF BIRTH _____

NOTICE:

Please read this carefully and sign below to indicate you have read, fully understand this notice and its contents, and agree to its terms.

It is understood and agreed that any misrepresentation or omission of information by me in this application will be sufficient for cancellation and/or separation from Hayden Parks and Recreation. Furthermore, I understand that just as I am free to resign from my volunteer position at any time, that Hayden Parks and Recreation also reserves the right to terminate my volunteer position at any time with or without prior notice. I give the right to my current and previous employers, person, references, and organizations to provide any information pertinent to my being selected with the best interests of the participants in mind. I also understand, agree to and hereby authorize the use of the above information to complete a background investigation, which includes a criminal record check. I understand that the registered activities & services may have an element of hazard or inherent danger & I take full responsibility for my actions & physical condition. I agree to indemnify & hold the Town of Hayden & employees from any liability loss, cost or expense (including attorney's fees, medical & ambulance costs) that may incur while volunteering in parks and recreation activities. I give my consent to use any photographs or videotape taken in future promotional or marketing materials. Volunteer signature below shall constitute acceptance of this liability waiver, photo release, medical release, and acceptance of the terms of the HPR "Spirit of Sportsmanship" Contract.

SIGNATURE _____ DATE ____/____/____

(Must be signed by participant (parent or legal guardian if under 18))

TOWN OF HAYDEN OFFICIAL USE ONLY:

After completing the background check on above signed person, the Town of Hayden gives the following recommendation to Hayden Parks & Recreation regarding volunteer status regarding said individual:

(Check One)

YES, I recommend _____, Hayden Parks & Recreation full access privileges.
(Name of Volunteer)

YES, I recommend _____, Hayden Parks & Recreation limited privileges.
(Name of Volunteer)

Limited from _____

NO, I DO NOT recommend _____, Hayden Parks & Recreation privileges.
(Name of Volunteer)

Signed _____ Date _____

Finance Director

HPR OFFICIAL USE ONLY:

After review of the above coaching application,
Hayden Parks and Recreation _____ stated individual for volunteer coaching for the _____ season.
(Recommends/Does not recommend) (Year/s)

Approved by the HPR Board on: _____
(Date)

Notes: (Equipment Checked Out, Board Recommendations, Limitations, etc)

Equipment Check Out Date _____ Equipment Returned Date _____