

E-SOCCER COACH APPLICATION

COACH INFORMATION

Last First

Gender M / F Age Shirt Size (pls circle) XS S M L

I would like to be (circle one): Head coach Assistant/Jr coach

Parent/Guardian Name (if coach is a minor)

Volunteer/Parent/Guardian Phone Alt phone

Volunteer/Parent/Guardian Email

Emergency Contact (must be 18 or older)

Relation Phone



QUESTIONNAIRE

Has the volunteer worked with children, including children with special needs in other sports programs?

Y / N If Yes (Describe) _____

As part of the application process, do you agree to allow the E-Soccer Program to conduct a criminal records check to help determine the applicant's suitability to work with children in the position the volunteer is applying for? Y / N

Does the volunteer applicant have any special needs that the E-Soccer program should be aware of in regard to participation in the Program? Y / N

Has the volunteer ever been diagnosed by a medical doctor with allergies, asthma, hemophilia, heart condition history of respiratory illness, or other significant medical condition?

Y / N If Yes, describe _____

If applicant is a minor, is this going towards "service learning hours"? Y / N

Does the applicant agree to commit to 2 hours every Saturday from 3:30 - 5:30pm beginning March 2 - April 27? Y / N

Does the applicant agree to attend the workshop training on February 23 from 10am-12pm? Y / N

*******Please email completed form to esocerguam@gmail.com*******

RELEASE OF LIABILITY

I understand that participation in the in the E-Soccer Program of the Guam Christian Church maybe hazardous to the volunteer. In signing below, I assume risk of harm or injury which may occur to the volunteer as a result of participating in the E-Soccer Program of the Guam Christian church.

I hereby waive all claims, and release, discharge, agree to hold harmless and indemnify the E-Soccer Program of the Guam Christian Church, its board of directors, officers, employees, volunteers, officials, sponsors and other representatives from any and all actions, claims, costs and expenses and demands of every kind and description, including, but not limited to personal injury, property damage and death, based on negligence, contract claim or legal theory, arising out of the volunteer's participation in E-Soccer Program activities and events.

Additionally, I consent and give permission to the E-Soccer Program of the Guam Christian Church, its representatives, officials, coaches, agents, employees, sponsors, to insert pictures or video of myself or my child on our website and other promotional material describing, advertising or promoting the E-Soccer program. In consenting to such uses I hereby waive the right to inspect and approve the images and information used, as well as all rights to compensation.

I also give my consent for the E-Soccer Program of the Guam Christian Church to act as my agent(s) in obtaining medical, dental or surgical attention and/or treatment for volunteer , should such attention or treatment become necessary and appropriate under the circumstances, as a result of the volunteer's participation in E-Soccer Program activities or events. In granting this permission, I understand that any expenses incurred by or on behalf of the participant for such treatment and/or attention are my sole responsibility .

Signature of volunteer or parent/guardian (if minor)

Date

Print Name