

**LAWRENCEBURG PARKS & RECREATION
COACH APPLICATION**



Name _____ Date _____

Address _____ City _____ State _____ Zip _____

Cell Phone _____ Secondary Phone _____

Cell Phone Carrier (ex. Verizon, AT&T, Sprint, etc) _____

Email Address _____

Child's Name _____ Age _____

Would you like to be: Head Coach _____ Assistant Coach _____

Do you have someone you wish to coach with? If so please complete below:

Name _____ Phone _____

Child's Name _____ Age _____

Please mark the following age group(s) you wish to coach/assistant coach:

5&6 _____ 7&8 _____ 9&10 _____ 11&12 _____ 13-18 _____

Coaching Experience:

Have you ever coached softball before? _____

If so, how many years have you been coaching? _____

What other sports do you have experience coaching? _____

Other information about yourself relevant to coaching a group of youth:

LPRD does not provide coaches with a team shirt but we do give coaches the opportunity to purchase one. If you would like one please mark the size below and submit payment with this application.

Shirts are \$12.00 for all sizes

Small _____ Medium _____ Large _____ XL _____ XXL _____ XXXL _____

**PLEASE RETURN FORM TO LAWRENCEBURG PARKS AND RECREATION DEPT.
ROTARY PARK 927 N MILITARY AVE**

Lawrenceburg Parks and Recreation Department
Volunteer Contractual Information
Application valid for one year

Print Full Legal Name: _____ **D.O.B:** _____

Print Address: _____

Drivers License # _____ **S.S.#** _____

HOLD HARMLESS RELEASE

As a volunteer contractual individual of the City of Lawrenceburg (officials, scorekeepers, instructors, or other contractual individuals) I agree to hereby release and hold harmless the City of Lawrenceburg, the Lawrenceburg Parks and Recreation Department, the Sponsors, and Supervisors from any and all claims of injury arising in any Lawrenceburg Parks and Recreation Department activity. I understand that I am **not** a paid contractual individual and not considered an employee of the City of Lawrenceburg.

I further agree to indemnify and save harmless the City of Lawrenceburg, its officers, agents and employees from and against all loss or expense (including attorney fees) by reason of liability imposed by law upon the City of Lawrenceburg for damages due to bodily injury, including loss of thereof, arising out of or in consequence of the performance of this agreement, providing such injury to persons or damage to property is due or claimed to be due to the negligence of the above named participant, its officers, employees, or agents. A copy of this authorization shall be effective as the original.

I have read, agree and accept the Hold Harmless Agreement above.

Name: (please print) _____

Signature: _____ **Date:** _____

RELEASE OF INFORMATION

By signing this registration form I understand that my background may be checked for any type of criminal activity or arrest record I may have. I further understand that I may be terminated as a coach, for any misconduct, by the Lawrenceburg Parks and Recreation Department. I accept full responsibility for my conduct, the conduct of my assistant coach, players, parents and any other person associated with the team I am assigned.

Signature: _____ **Date:** _____

OFFICE USE ONLY

Shirt: _____ **Amount:** _____ **Background Check by:** _____ **Date:** _____