

## Batavia Youth Football League Coaches Application

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

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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

E-mail Address (if applicable) \_\_\_\_\_

Position Applying For: \_\_\_\_\_ Years Experience \_\_\_\_\_

Have you coached before? \_\_\_\_\_ Where? \_\_\_\_\_

Have you coach for B.Y.F. before? \_\_\_\_\_ At what capacity? \_\_\_\_\_

Do you have any relatives associated with B.Y.F. ? \_\_\_\_\_ Who? \_\_\_\_\_

What are your goals do you hope to accomplish? \_\_\_\_\_

What kind of system have you coached before? \_\_\_\_\_

### References: (Please Provide 3)

Name	Relationship	Address	Phone

By signing this application, I hereby state that all information I have provided is current And factual. I also agree that if selected for a position, I will follow all policies and Guidelines set forth by the Batavia Youth Football.

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

