



# Greater Napanee Soccer Club

## Coach Application

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

List Previous Coaching, Soccer and Volunteer Experience:

---

---

---

Indicate which of your children you would like to coach including their NAMES and the DIVISION they will be playing in this season:

---

---

If accepted, I agree to follow the Bylaws and Operating Regulations of the Greater Napanee Soccer Club and to follow the guidelines for fair play and coaches responsibilities. I will not put myself in a position of being one on one with an underage member of the Greater Napanee Soccer Club nor give a ride to an underage member of the GNSC without the Parents or Guardians written consent. I understand that participating in organized soccer is at my own risk and that Greater Napanee Soccer Club, it's Executives, coaches, managers, officials or sponsors will not be held responsible for any injuries. I agree to hold the GNSC harmless for all actions, liabilities arising out of the activities of The Club.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

(Revised March 2016)

Shirt Size: \_\_\_\_\_