Cumberland County Magic Girls' Softball Organization

Coaching Application

Please complete the following application and return to:

Mail: Cumberland County Magic
390 Alexander Spring Road
Carlisle, PA 17015

Email: ccmagicgirlssoftball@yahoo.com

All information must be completed as it is used to obtain insurance as well as to complete a background check.

Personal Information:

Full legal name (first, middle initial and last) _____ Date of Birth _____

Street Address _____

City _____ State _____ Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____

Drivers License # _____ Drivers License State _____ Drivers License Expiration Date _____

Current Employer _____ Supervisor's Name and Telephone Number _____

Current Employers Address (Street, City and Zip) _____

Education

High School Name and Location _____ Date Graduated _____

College Name and Location _____ Date Graduated _____

Major/Degree _____

Coaching Experience

Organization Name	Sport	Position	Dates	Contact Person & Phone

References

Please submit three (3) personal references not related to you and who have personal knowledge of your previous coaching experience and history of working with children.

_____
Name

_____
Address (Street, City, State and Zip)

_____ _____
Home Phone Cell Phone

_____
Name

_____
Address (Street, City, State and Zip)

_____ _____
Home Phone Cell Phone

_____
Name

_____
Address (Street, City, State and Zip)

_____ _____
Home Phone Cell Phone

Coaching Position Applying For

U10 _____ U12 _____ U14 _____ U16 _____ U18 _____

Head Coach _____ Assistant Coach _____ Other (please specify) _____

Experience

Have you managed and/or coached a traveling athletic team? YES NO

If yes, list in detail all of your managing/coaching experience. Please include the following:

- Dates (months and years)
- Sport
- Age/Group
- Boys/Girls
- Organization
- Location

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What is your coaching philosophy in regards to dealing with the players, parents and coaching staff?

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Please describe your definition of “success” for a travel softball team and what you believe it takes to be a successful softball travel team coach.

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Disclaimer Statement

I have read and understand that I may be disqualified, terminated or prohibited from serving as a volunteer of the Cumberland County Magic Girls Fastpitch Softball if, among other things, I have:

1. Been convicted (including crimes of record which have been expunged and please of "no contest") of a crime of child abuse, sexual abuse of a minor, physical abuse, neglect of a child and/or any other felony charge;
2. Been adjudged liable for civil penalties or damages involving sexual, physical or verbal abuse of children;
3. Been subject to any court order involving any sexual, physical or verbal abuse of children;
4. Had parental rights terminated;
5. Have a history with another organization (volunteer, employment, etc.) of complaints of sexual, physical or verbal abuse of minors;
6. Resigned, terminated or asked to resign from a position (volunteer or employment) due to a complaint(s) of sexual, physical or verbal abuse of minors;
7. A history of behavior that indicates I many be a danger to children of the Cumberland County Magic Girls' Softball Organization .

Disclaimer

Do any of the statements above apply to you? YES _____ NO _____

If you "YES" to any disclosure statement, indicate which number(s) _____ and attach a written explanation on a separate page.

Have you ever been convicted of a felony or misdemeanor crime? YES _____ NO _____

Have you ever lived outside the state of Pennsylvania during the last 10 years? YES _____ NO _____

*If "YES", please identify the city(s) and state(s):

_____

Have you ever been removed or disciplined from any sports organization as a coach, assistant coach, manager or volunteer in the last 5 years? YES _____ NO _____

*If "YES", please explain on a separate page.

I hereby give my consent to the Cumberland County Magic Girls' Softball Organization to conduct the following background checks:

- Act 34 Background Check YES _____ NO _____
- Driving Record YES _____ NO _____

Waive, Consent and Release of Liability

I hereby consent to the investigation and verification of all information given in this application, including searches of law enforcement and public records (including driving records and criminal background checks) and contact with former references and current employers. I hereby release and agree to hold harmless the Cumberland County Magic Girls' Softball Organization concerning the use of or any attempt to verify the information provided in this application. I declare that all the information given by me in this application is true and complete to the best of my knowledge, and I understand that any misrepresentation or omission may be cause for suspension, dismissal or disqualification from my volunteer status with the Cumberland County Girls' Softball Organization.

If accepted as a Cumberland County Magic Girls Softball coach or volunteer, I hereby agree to abide by the Cumberland County Magic Girls' Softball Board of Directors, and understand I may be removed as a coach or volunteer at any time with or without cause.

I have read the above disclosure statement, disclaimer, waiver, consent and release of liability and I full understand the terms of each, and understand that I have given up substantial rights by my signing this form and agreeing to these terms, and I sign this form and agree to these terms freely and voluntarily and without inducement of any kind.

_____ _____

Signature of Applicant Date