YMCA Youth Sports Volunteer Coach Application

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)	Background Check
•	On-line Training Complete
	Attended Required

Staff Check List

Volunteer Application

NAME	SEX	Are you 18	3 or older?	Coach Meeting
(If under 18 (Parental permission i	s required)			
ADDRESS		CITY	ZIP	
HOME PHONE #	_ Cell Phone		E-MAIL	
Work Place	Work Pho	ne	Occupa	tion
Type of volunteer position you are	applying for:	Coach	Assistant Coach	
Sport	_ Age group you pro	efer to work with	U6/6U U8/8U	U10/10U U12/12U 14/14U
Regarding This Sport:				
Have you played this spor	t? Yes No	Have you coa	ched this sport? Yes	No
Describe the skills, characteristics, Volunteer Coach. Please use the b				
If we have other volunteers with si	milar experience, wh	y should we pick you	u to represent the YM	CA as a coach or assistant coach?

When are you available to volunteer? Please mark the BEST answer. Evenings between 4:30-7:30 PM and Saturday Evenings between 5:30-7:30 PM and Saturday

CONDITIONS OF PROGRAM

<u>Conduct and Right to Use Facility:</u> The applicant agrees to abide by all rules and regulations of the YMCA, and understands that failure to act in accordance with the rules may result in expulsion from the YMCA or its programs and membership.

Waiver/Release: In consideration for being permitted to utilize the facilities, services, and programs of the YMCA for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the YMCA, without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agree and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the YMCA for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same an being safe and reasonably suited for the purpose of such observation, use, or participation. The YMCA is legally mandated to report any suspicion of child abuse to the proper authorities.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE YMCA FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE YMCA, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING:

- 1. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND CONVENANTS NOT TO SUE the YMCA, its directors, officers, employees and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, heirs, and next of kin for any loss or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the YMCA, without respect to location.
- 2. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the YMCA premises or in any way observing or using any facilities or equipment of the YMCA or participating in any program affiliated with YMCA whether caused by the negligence of the releasees or otherwise.
- 3. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITIES FOR AND RISK OR BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releasees or otherwise while in, about, or upon the premises of the YMCA and/or while using the premises or any facilities or equipment thereon or participation in any program affiliated with the YMCA.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Georgia and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAD READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER IF LIABILITY AND INDEMNITY AGREEMENT & further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE		
Signature:	Date:	