

SOUTH LAKE SOLDIERS YOUTH SPORTS INC



3244 White Blossom Lane Clermont, FL 34711

SouthLakeSoldiers@gmail.com

Coach/Volunteer Application

	Tackle Football:]8U □10U □12U □14U	☐ Step/Dance Te	eam
	Circle one: I	Iead Coach Asst. CoachPractice	Coach OnlyTeam N	Mom/Dad
ime or flexibility to	be at all practices but w	ould still be more than willing to help	the coaching staff du	nd willing to learn or may not have the tring practices. During games you will e coaches will still be required to pas
Volunteer Information:		Season:	Spring or Fall 202	
Last Name:		First Name:		Date of Birth:
Address:				
Age: Gende				
Phone #:	F	mail address :		
mergency Contact Name:		Phone:		
Will you have a chi	d on the team? Yes or N	o Which team and how many	?	
-		ng in the military? Which branch? g selected as a coach/volunteer, it's ju		
Coaches only:				
How many years ha	ve you coached for?	WhichLeague(s)?		
Cuet colocted on a 1	nead coach, will you be v	villing to be an assistant coach? Yes	or No	
i not sefected as a r		than the one selected above? Yes or	NT.	

Volunteer Signature: ______ Date: _____