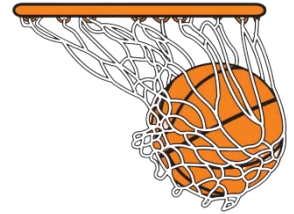




2024-25
Windham Recreation
Volunteer Basketball Coach Application



COACH INFORMATION:

Name _____ Date of Birth _____

Email _____

Shirt Size ___ S ___ M ___ L ___ XL ___ 2XL

Address _____ Town _____ Zip Code _____

Home Phone _____ Cell Phone _____ Work Phone _____

Full Name of Child I Wish to Coach _____ Male / Female

School Child is Attending _____ Grade _____

Preference _____ Head Coach _____ Assistant Coach

If possible, I would like to coach with (List other coach's name) _____

**Coaches are required to attend the mandatory Coaches Meeting on Friday, October 18, 2024. Meeting times will be announced in Early October.*



**Volunteer Consent: Acknowledge and Consent for
The Town of Windham to obtain Criminal Record Information**

By signing below, I acknowledge that the Windham Recreation Department may itself, or through its agents, employees or other third parties, obtain any or all the following information on me as part of my application to be a coach or parent volunteer in any capacity in the Town of Windham. I hereby authorize the Windham Recreation Department to obtain the following information:

1. Criminal conviction background checks through review of court and similar official records
2. Date of birth

In obtaining any of the foregoing reports or information, the Windham Recreation Department may obtain information on my character, general reputation, mode of living, and personal characteristics.

I voluntarily, knowingly and unconditionally release any named or unnamed informant from any and all liability resulting from the furnishing of this information.

Upon my request or as otherwise required by law, the Windham Recreation Department will tell me whether any of the foregoing reports were requested and the names and addresses of any consumer reporting agency that provided such reports. I understand that I have the right to request and obtain a complete and accurate disclosure of the nature and scope of any investigation.

Print Full Name _____ **Signature** _____

Date of Birth _____ **Phone Number** _____

Address _____

Previous Address if less than 5 years _____