

Baraboo Riptide Coaching 2019 Application

NAME:

ADDRESS:

CELL PHONE:

HOME PHONE:

E-MAIL:

ARE YOU OVER 16 YEARS OF AGE?

APPLYING FOR: SPRING CLINIC (MON & THURS 5:30-8:30pm April 1 – May 23)

SUMMER (MON – FRI & MEETS; 5/28/2019 – 7/28/2019)

BOTH SPRING AND SUMMER

ARE YOU AVAILABLE FOR BOTH MORNING PRACTICES (7:15-10:15am) AND EVENING PRACTICES (5:00-6:15pm)?

PLEASE LIST ANY DATES YOU ARE UNABLE TO COACH:

Why do you want to be a Riptide coach?

List any extra-curricular activities or organizations you have been in, in the past 2 years?

List any training, certification or experience you have had pertaining to this position?

Do you have any plans this summer that would cause you to miss practices or meets?

WORK HISTORY:

EMPLOYER	DATE OF EMPLOYMENT	YOUR POSITION TITLE	POSITION DESCRIPTION

REFERENCES (other than family):

PRINT NAME	ADDRESS	PHONE NUMBER

By signing below, I hereby verify that all information provided in this application is true and correct.

Signed:	Date:
---------	-------

Completed application due by: March 15, 2019

E-mail completed application to: riptide.emailing@gmail.com