

Please Fax to
770-966-7891 or email to
barnaud@acworth.org

**City of Acworth
Coach and Volunteer Application
Acworth Football and Cheerleading Application**

Subsequent to a review of our volunteer needs, a review of your application and a successfully completed background check conducted by the Acworth Police Department we will contact you with respect to this application. We appreciate your interest in working with the youth of our Community.

Name _____

Home Telephone _____

Address _____

Work Telephone _____

Email Address _____

Cell Phone _____

Which team are you interested in coaching and/or volunteering with?: _____

Are you interested in? Head Coach _____ Asst. Coach _____

Asst. Position, is there a head coach you would like to coach with, if so who? _____

Would you coach and instructional team? _____ Do you have a child in the program? _____

Child's name and age as of 8/1/2013 _____

Would you coach a team other than the one your child participates on? Yes _____ No _____

Describe your past coaching experience in any youth sporting activity _____

Provide Three Coaching or Personal references (must include telephone numbers) _____

I hereby **authorize** the **Acworth Police Department** to receive any criminal history record information pertaining to me, which may be in the files of any federal, state or city criminal justice agency **nationwide**.

This criminal history check is being performed at my request and on behalf of the **City of Acworth** and the Acworth Football and Cheerleading Association. I understand that the City of Acworth is performing background checks on all the coaching candidates and volunteers for city associations including the Acworth Football and Cheerleading Association.

I further understand that although the specific nature of an offense shall not be provided to the City of Acworth, any applicant who does not successfully complete the background check will be notified. Specifically, I understand that any of the following including, but not limited to (1) Any felony during one's lifetime, (2) Any crime against children during one's lifetime and, or (3) any misdemeanor drug offense within the last ten years will disqualify me from serving as a volunteer or coach for the Acworth Football and Cheerleading Association..

Date of Request _____

Full Name Printed _____

Sex _____

Race _____

Maiden Name, Aliases, Name Changes _____

Date of Birth _____

Street Address _____

Social Security Number _____

City **County** **State** **Zip Code**

Signature _____