



## YMCA Volunteer Coach Position Description

**Position:** YMCA Coach

**Department:** Sports/Recreation

**Supervisor:** Sports Coordinator

### Purpose of Position

To insure the mission of the YMCA is carried out by teaching sport specific techniques in a safe, courteous and knowledgeable

### Position Specific Responsibilities and Requirements

- To attend coaches meeting organized by the Program Director.
- Show up for practices and games prepared and on time.
- Attend all required training and scheduled meetings.
- Treat youth, coaches, officials, and parents with dignity and respect.
- Provide for a safe and fun filled experience.
- Conduct yourself at all times with dignity and professionalism.
- Insure all youth play an equal amount of each game and practices.
- Direct concerns and constructive ideas to responsible YMCA staff director.
- To have good knowledge of sport specific rules and regulations regarding applying rules to game situations and practice activities.
- To know proper emergency procedures in the event of an emergency.
- To maintain an open line of communication with the Sports Director regarding any issues.
- To maintain a strong communication system with all team parents regarding practice/game times and locations.

\_\_\_\_\_  
Coach Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Coach printed name



## YMCA Coach Contract

I understand that my responsibilities as a youth coach are of great importance and that my actions have the potential to significantly influence the youth athletes whom I coach. Therefore, I promise to uphold the following rights of young athletes to the best of my ability.

Everyone has the **RIGHT TO:**

- Participate in sports
- Play as a child, not as an adult
- An equal opportunity for success
- Have fun in sports
- Share in leadership
- Have qualified leadership
- Participate in a safe environment
- Be treated with dignity
- Proper preparation in sports

### COACH CODE OF ETHICS

1. I will treat each player, opposing coach, official, parent, and administrator with respect and dignity.
2. I will do my best to learn the fundamental skills, teaching and evaluation techniques, and strategies of my sport.
3. I will become thoroughly familiar with the rules of my sport, league, and facility guidelines.
4. I will become familiar with the objectives and communicate them to my players and their parents.
5. I will uphold the authority of officials who are assigned to the games in which I coach and I will assist them in every way to conduct fair and impartial competitive contests.
6. I will conduct my practices and games so that all my players have an opportunity to improve their skill level through active participation.
7. I will cooperate with the administration of our organization in the enforcement of rules and regulations, and I will report any irregularities that violate sound competitive practices.
8. I will protect the health and safety of my players by insisting that all of the activities under my control be conducted for their psychological, and physiological welfare, rather than for the vicarious interest of adults.

I promise to conduct myself in accordance with the YMCA Code of Ethics for Coaches and abide by the Coaches Contract.

\_\_\_\_\_  
Coach Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Coach printed name

**YMCA of the Capital Area  
Volunteer Application**

Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of birth: \_\_/\_\_/\_\_

Social Security #: \_\_\_-\_\_\_-\_\_\_ Occupation: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Have you worked with children between the ages of 3 and 17 before? \_\_\_\_\_

What is your experience working with youth? \_\_\_\_\_  
\_\_\_\_\_

Type of Volunteer Position you are applying for: (check one)

Coach \_\_\_\_\_ Official \_\_\_\_\_ Counselor \_\_\_\_\_ Other (describe) \_\_\_\_\_

Have you volunteered for a YMCA in the past? \_\_\_\_\_ Which Y? \_\_\_\_\_

Describe your specific skills, characteristics, experience and/or certifications that will help you succeed as a YMCA Volunteer \_\_\_\_\_  
\_\_\_\_\_

**List (3) References: (NOTE: (1) reference must be a family member)**

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Relationship \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor? (circle one)    yes    no

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

**Days and times you are available to volunteer:**

Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

If volunteering for service hours, please provide the number of hours that you are required to meet \_\_\_\_\_.

I understand that this application does not guarantee that I will be selected as a volunteer with the YMCA.

All of the information given above is true to the best of my knowledge and any false information may cause the suspension of my obligations as a YMCA Volunteer. I understand that the YMCA reserves the right to conduct reference and background checks through law enforcement agencies.

\_\_\_\_\_  
Volunteer Applicants signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
YMCA Staff signature

\_\_\_\_\_  
Date

**YMCA OF THE CAPITAL AREA  
PRE-EMPLOYMENT AND/OR VOLUNTEER DISCLOSURE  
AUTHORIZATION TO RELEASE INFORMATION**

I understand that in connection with my application for employment, and/or continuous employment, and/or volunteer opportunities, YMCA of the Capital Area, **IntelliCorp Records, Inc.**, their agents, assigns or any other authorized third parties (collectively, the "Investigators") may be performing, requesting, obtaining or conducting a background check on me. This background check may include an inquiry into my employment history, education, general character or reputation, work experience, driving, criminal and credit histories and such other information the ("Information") as may be required.

I understand that Employer may rely on any part or all of this Information in determining whether to extend an offer of employment and/or volunteer opportunities to me. I further understand that if any adverse action is taken by Employer, or if Employer chooses not to extend an offer of employment and/or volunteer opportunities to me based upon the information, that I will be provided a copy of such Information along with a summary of my rights under the Fair Credit Reporting Act.

I understand that the background check which may be performed by investigators is being performed as part of the pre-employment and/or volunteer opportunities process to evaluate me for employment/volunteer opportunities and is not conducted for any other purpose other than in connection with my application for employment and/or volunteer opportunities.

I have read this Pre-Employment and/or Volunteer Disclosure and by signing below, hereby authorize Investigators to conduct a background check as described herein in conjunction with my application for employment and/or volunteer opportunities. I hereby release Investigators from any and all liability related to the procurement or disclosure of any information provided by me or obtained about me in connection with my application for employment and/or volunteer opportunities with Employer. I further direct and authorize Investigators to conduct the background check and further authorize any third parties who may be the custodians of or in possession of the requested Information, to disclose such Information to Investigators in connection with this background check.

I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection of employment and/or volunteer opportunities and my discharge after employment and/or volunteer opportunities.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Printed Name (First, Middle, Last)**

\_\_\_\_\_  
**Social Security Number**

\_\_\_\_\_  
**Date of Birth**      \_\_\_\_\_  
**Gender (Male / Female)**

\_\_\_\_\_  
**Maiden Name (if applicable)**

\_\_\_\_\_  
**Driver's License #**      \_\_\_\_\_  
**Exp. Date**

\_\_\_\_\_  
**Driver's License Issuing State**

\_\_\_\_\_  
**Current Address, City, State, Zip Code**

\_\_\_\_\_  
**Dates Lived Here**

**Addresses for the Past Seven (7) Years:**  
**(Include street name and street number, city, state, zip code)**

**Dates of Residence**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Branch Name: \_\_\_\_\_ Dept.: \_\_\_\_\_ Date: \_\_\_\_\_