

**Frankfort Park District
Fire Starters Developmental Soccer League
Volunteer Coach Registration**

**Volunteer coaches meeting March 23rd
Founders Community Center at 6:30pm**

All volunteer coaches are asked to attend the pre-season coaches meeting. No experience is necessary but all coaches must be available for one scheduled practice during the week and one game on Saturday morning or afternoon. Coaching in this program will give you the opportunity to teach the participants soccer skills along with the importance of teamwork and sportsmanship.

If you are interested in acting as a volunteer coach please fill out the form below and return it to the Founders Center, 140 Oak Street. Registration is also available at www.teamsideline.com/frankfort

Full Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Please circle participant session:

4yr-K Tuesday 1st-3rd Tuesday

4yr-K Thursday 1st-3rd Thursday 4th-6th Thursday

Please list participants name: _____

Is there someone with whom you would like to coach? _____

Shirt Size _____

Coaches will then have one practice and one game per week. The Frankfort Park District believes in equal playing time for everyone and we expect the coaches to follow this philosophy.

Thank You! Your assistance will help make this program a success.

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NOTICE – BACKGROUND INVESTIGATION

In connection with your employment or coaching status with Frankfort Park District (the “Company”), notice is hereby given that a consumer report and/or investigative consumer report may be obtained from a consumer reporting agency for employment or coaching purposes. These reports may contain information about your character, general reputation, personal characteristics and mode of living, whichever are applicable. They may involve personal interviews with sources such as your neighbors, friends or associates. The reports may also contain information about you relating to your criminal history, credit history, driving and/or motor vehicle records, education or employment history, or other background checks.

You have the right, upon written request made within a reasonable time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report prepared by contacting the Company and Protect Youth Sports, 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618; Phone: 1-877-319-5587. For information about Active Screening, Inc.’s privacy practices, see www.activescreening.com. The scope of this notice and below authorization is not limited to the present and, if you are hired, will continue throughout the course of your employment and allow the Company to conduct future screenings for retention, promotion or reassignment, as permitted by law and unless revoked by you in writing.

ACKNOWLEDGEMENT AND AUTHORIZATION

By signing below, I hereby authorize the obtaining of consumer reports and/or investigative consumer reports by the Company at any time after receipt of this authorization and throughout the course of my employment, if applicable.

Signature: _____ Birth Date: _____

Print Name: _____ SSN: _____

Gender: M - F License #: _____ State: _____