

OFFICE USE ONLY	
Date/Time Received: Staff Initials: Permit Number:	

Volunteer Coach Sign Up Form

Coach's Name:	Child's	Name:	
Sport:	Email:		
Address:	City:	State:	Zip:
Home Phone:	Cell Phone:		
I am interested in being: Head	Coach Assistant	Coach	
Coach Shirt Size: Small N	1edium ☐ Large	☐ XL ☐ 2XL	☐ 3XL
If you are interested in coaching with a	another coach, please lis	st their name here:	
If you are interested in coaching Little	Soccer League, which	division would you pre	fer:
☐ Division I (4-5 years old) ☐ ☐	Division II (6-7 years old)		
If you are interested in coaching Flag I	Football, which division	would you prefer:	
☐ Division I (5-7 years old) ☐ ☐	Division II (8-10 years old	d)	
If you are interested in coaching Yout	h Volleyball , which divi	sion would you prefer:	
☐ 3rd/4th Grade ☐ 5th/6th (Grade ☐ 7th/8th G	rade	
If you are interested in coaching Girls	Recreational Softball,	which division would y	ou prefer:
☐ 1st Grade ☐ 2nd Grad☐ 6th Grade ☐ 7th Grad		·	5th Grade
If you are interested in coaching T-Ball , which division would you prefer:			
Division I (4-5 years old)	Division II (6-7 years old)		
If you are interested in coaching Youth Basketball, which division would you prefer:			
☐ 2nd Grade ☐ 3rd Grade ☐ 7th Grade ☐ 8th Grad	<u>—</u>	5th Grade	☐ 6th Grade
Practice Day Preference (if applicable): Practice Time Preference (if applicable) Are there any days you cannot practice):		

Volunteer Waiver & Release

IMPORTANT INFORMATION:

The Grayslake Community Park District is committed to conducting its recreation programs and activities in a safe manner and holds the safety of volunteers in high regard. The Grayslake Park District continually strives to reduce such risks and asks that all volunteers follow safety rules and instructions that are designed to protect the volunteer's safety. However, volunteers must recognize that there is an inherent risk of injury when choosing to volunteer for any activity or program. Please recognize that the Grayslake Community Park District carries only limited medical accident coverage for volunteers; therefore, it is strongly urged that all volunteers review their own health insurance policy for coverage. Additionally, each volunteer is solely responsible for determining if he/she is physically fit and/or properly skilled for any volunteer activity. It is always advisable, especially if the volunteer is pregnant, disabled in any way or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK:

Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury when providing volunteer services. Understandably, not all hazards and dangers can be foreseen. Volunteers must understand that depending upon the volunteer services, certain risks, dangers and injuries due to acts of God, inclement weather, slip and falls, inadequate or defective equipment, failure in supervision or instruction, premises defects, horseplay, carelessness, lack of skill or technique, and all other circumstances inherent to the particular volunteer services exist. In this regard, it must be recognized that it is impossible for the Grayslake Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK:

Please read this form carefully and be aware that in consideration for providing volunteer services, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss which you may sustain as a result of participating in any and all activities connected with and associated with your volunteer services (including transportation services/vehicle operations, when provided).

As a volunteer, I recognize and acknowledge that there are certain risks of physical injury to volunteers in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that I may sustain as a result of my volunteer services. I further agree to waive and relinquish all claims I may have (or accrue to me) as a result of my volunteer services against the Grayslake Community Park District including its officers, officials, agents, volunteers and employees (hereinafter collectively referred as "Parties").

I do hereby fully release and forever discharge the Parties from any and all claims for injuries, damages, or loss that I may have or which may accrue to me and arising out of, connected with, or in any way associated with my volunteer services.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering on-line or via fax, my on-line or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Have you ever beer	convicted of, or found to be a child sex offender?	☐ Yes	□ No	
PLEASE PRINT: Coa	ch's Name:		Date:	
Coach's Signature: _	(Parental Signature if under 18 years of age)		Date:	
	PARTICIPATION WILL BE DENIE if the signature and date are not on the		er.	

Coaches' Code of Ethics

I hereby pledge to live up to my responsibilities as a Youth Sports Coach by following the Coaches' Code of Ethics:

I will...

...encourage good sportsmanship from fellow players, coaches, officials and parents at every game and practice by demonstrating good sportsmanship.

...place the emotional and physical well-being of my players ahead of a personal desire to win.

...treat each player as an individual, remembering the large range of emotional and physical development for the same age group.

...do my best to provide a safe playing situation for my players.

...promise to review and practice basic first aid principles needed to treat injuries of my players.

...do my best to organize practices that are fun and challenging for all my players.

...lead by example in demonstrating fair play and sportsmanship to all my players.

...be knowledgeable in the rules of each sport that I coach, and I will teach these rules to my players.

...use those coaching techniques appropriate for all of the skills that I teach.

...remember that I am a Youth Sports Coach, and that the game is for children and not adults.

...provide a sports environment for my team that is free of drugs, tobacco, and alcohol, and I will-refrain from their use at all youth sports events.

...treat each player, coach, official, parent and administrator with respect and dignity.

I understand that failure to comply with the Code of Ethics policy may lead to disciplinary action being taken against me - such disciplinary action may include suspensions or expulsion from the program.

PLEASE PRINT: Coach's Name:		Date:	
Coach's Signature:		Date:	
	(Parental Signature if under 18 years of age)		

GRAYSLAKE PARK DISTRICT BASKETBALL PROGRAM WAIVER & RELEASE

The Grayslake Community Park District is committed to conducting its recreation programs and activities in a safe manner, and holds the safety of participants in high regard. The Grayslake Park District continually strives to reduce risks and insists that all participants follow safety rules and instructions that are designed to protect the participants' safety. However, participants and parents/guardians of minors registering for this program must recognize that there is an inherent risk of injury when choosing to participate in recreational programs/activities. You are solely responsible for determining if you or your minor child/ward is physically fit and/or adequately skilled for the activities contemplated by this agreement. It is always advisable, especially if the participant is pregnant, disabled in any way, or recently suffered an illness, injury or impairment, to consult a physician before undertaking any physical activity.

WARNING OF RISK

Basketball is intended to challenge and engage the physical, mental and emotional resources of each participant. Despite careful and proper preparation, instruction, medical advice, conditioning and equipment, there is still a risk of serious injury. All hazards and dangers cannot be foreseen. Certain risks include, but are not limited to: collisions between players and stationary objects, inability to stop one's momentum and encountering off-court dangers/hazards, unnecessary roughness (elbowing, hipchecks, undercutting other players in the air, tripping and shoving), slips and falls, attempting a maneuver beyond the player's skill level (i.e. a dunk), poor officiating, improper personal protective equipment, slippery floors, inadequate or unsafe playing conditions, failure in supervision, unsportsmanlike conduct, dangerous/defective court conditions, and all other circumstances inherent to the sport of basketball. In this regard, it is impossible for the Grayslake Community Park District to guarantee absolute safety.

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTION OF RISK

Please read this form carefully and be aware that in signing up and participating in this program/activity, you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages or loss, which you or your minor child/ward might sustain as a result of participating in and and all activities connected with and associated with this program/activity (including transportation services and vehicle operations, when provided). I recognize and acknowledge that there are certain risks of physical injury to participants in this program/activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward, or I, may sustain as a result of said participation. I further agree to waive and relinquish all claims I, or my minor child/war, may have (or accrue to me or my child/ward) as a result of participating in this program/activity against the Grayslake Community Park District, including its officials, agents, volunteers and employees.

I have read and fully understand the above important information, warning of risk, assumption of risk and waiver and release of all claims. If registering online or via fax, my online or facsimile signature shall subsitute for and have the same legal effect as an original form signature.

PRINT Participant's Na	me	_ Date
Participant's Signature	SIGNATURE (if participant is under 18 years	of anal

PARTICIPATION WILL BE DENIED

If the signature of adult participant or parent/guardian and date are not on this waiver.