

**SALISBURY UNIVERSITY  
SPORT CLUB COACH INFORMATION FORM**

**Name:** \_\_\_\_\_

**Club:** \_\_\_\_\_

**Address: Home** \_\_\_\_\_

**Business** \_\_\_\_\_

**Phone: Home** \_\_\_\_\_

**Office** \_\_\_\_\_

**Email Address :** \_\_\_\_\_

**Are You Currently Over 18 Years of Age:** Yes \_\_\_ No \_\_\_ (If no, parent or legal guardian must authorize participation).

**Sex:** Male \_\_\_ Female \_\_\_

**Drivers License #:** \_\_\_\_\_ **State** \_\_\_\_\_

**Have You Ever Been Convicted of a Crime:** Yes \_\_\_\_\_ No \_\_\_\_\_ (If yes, please provide details on a separate sheet)



This information is required by the Salisbury University Campus Recreation to promote the safety of our students and to ensure our program and the University is represented in a professional, ethical and upstanding manner.

**Qualifications (list any previous coaching or playing experience):**

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**List all current certifications that pertain to this position:**

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**My goals and expectations of coaching this club are:**

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