



City of Fort Lupton Recreation Center

203 South Harrison Avenue

Fort Lupton, Colorado 80621

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www.fortlupton.org

FUN, FIT, FORT LUPTON

YOUTH SPORTS VOLUNTEER JOB DESCRIPTION HAVE FUN

TITLE: Volunteer coach for Fort Lupton Recreation Center Sports League

DESCRIPTION:

- Coach of male or female athletes between the ages of 4-15
- You will be considered a role model for 10-15 young athletes assigned to your team; therefore sportsmanship, fair play and participation are mandatory.

RESPONSIBILITY:

- Plan and supervise games, practices, and events.
- Supervise assistant coaches or team parents
- Teach the young athlete the fundamentals of team sports
- Encourage the involvement of the parents in the sport
- Schedule and conduct parent and other necessary meetings
- Provide a safe and fun environment for the children
- Learn and follow all league rules, policies, and procedures
- Give each player equal playing time
- Put the feelings of players ahead of your desire to win
- Attend all league functions and participate in league activities

QUALIFICATIONS:

- Successfully complete the application procedure and pass a background check
- Attend any scheduled coaching interviews or meetings
- Successfully complete the National Youth Sports Coaches Association (NYSCA) Certification Program prior to the beginning of the season.
- Be enthusiastic
- Not want to win at all costs
- Must be patient, especially with children
- Be organized
- Be dependable.

I agree that I have read and understand the above job description for a youth sports league coaching position, and that I accept the terms of the job descriptions.

Applicant Signature

Name (Printed)

Date

Phone Number

Email

Sport

Please note: Failure to sign this page will render the application incomplete and unacceptable.

Recreation Coaching Contract

The philosophy of the City of Fort Lupton Recreation Department is to provide high quality programs and instruction while building a strong sense of sportsmanship to all participants. The Recreation Department also aims to provide a healthy and enjoyable recreational learning experience through honest competition under controlled conditions.

The Fort Lupton Recreation Department expects its coaches to do the following:

- Be positive to the participants and allow them to have fun.
- Teach proper skills/fundamentals to the participants
- Do not use foul language.
- Act as a role model
- Attend coaches clinic and be certified through the NYSCA
- Communicate with parents and participants
- Communicate with Recreation Staff
- Control tempers
- No arguing with officials/umpires – any concern must be handled in a positive and controlled manner.
- Provide an environment in which the child will learn sportsmanship and camaraderie.

The above mentioned expectations must be followed. If in any way they are not, there could be reason for withdrawal from coaching with the Fort Lupton Recreation Department immediately and in the future. The Recreation Department along with the Culture, Park, and Recreation board has the ultimate authority and decision making powers.

The Fort Lupton Recreation Department will not condone certain behaviors. Thus the following actions will result in **immediate suspension** from coaching now and in the future.

1. Any coach getting ejected from a game for any reason will be suspended until a meeting with the Culture, Park, and Recreation board is completed and a decision is made. The decision made at the meeting is final and can not be appealed.
2. Any coach playing an illegal player in any game or tournament will be suspended indefinitely. There is no appeal.
3. Any coach not abiding by the equal play time requirement will be suspended indefinitely. There is no appeal
4. Any coach coming to any team function under the influence of drugs or alcohol will be suspended indefinitely. There is no appeal.
5. Any coach attempting to injure a player directly or indirectly will be suspended indefinitely. There is no appeal.
6. Any coach engaged in lewd or sexual conduct, behavior or language will be suspended indefinitely. There is no appeal.

Coach's Name

Date

Sports Coordinator

Date

Please note: Failure to sign this page will render the application incomplete and unacceptable.

Expectation of Coaches

1. To place the emotional and physical well being of the child ahead of a personal desire to win
2. To treat each player as an individual
3. To provide a safe playing situation
4. To review and practice the basic first aid principles
5. To organize practices that are fun and challenging
6. To lead by example in demonstrating fair play and sportsmanship
7. To provide an environment that is drug, tobacco, and alcohol free
8. To be knowledgeable in the rules
9. To teach techniques appropriate for each skill
10. To remember that the games are for the children and not for the adults

Expectations of parents

1. To encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice, or other youth sports.
2. Place the emotional and physical well being of your child ahead of a personal desire to win
3. Insist that your child play in a healthy and safe environment
4. Support the coaches and officials working with your child
5. Demand a drug, alcohol, and tobacco free environment during all youth sports events
6. Remember that the game is for youth-not adults
7. Do your best to make youth sports fun for your child
8. Promise to help your child enjoy the sports experience by doing whatever you can, such as transportation, assisting coaching, or being a respectable fan
9. Ask your child to treat other players, coaches, fans, and officials with respect regardless of race, sex, creed, or ability.

Volunteers

We are asking the parents to help volunteer and assist us in making this experience fun and exciting for the players. If desired, ask for help from a team mother or father with setting up a treat list, making phone calls, and any other tasks as needed.

~Please initial and sign after reading all expectations~

Coach's Name

Date

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Southeastern Security Consultants, Inc.



Background Consent/Release Form

Organization Name: City of Fort Lupton Recreation Department

NYSCA Chapter ID Number: CHP-3736

Applicant's Name (printed) _____

Social Security Number _____ Date of Birth _____

Applicant's Address _____

City _____ State _____ Zip _____

I, _____, authorize and give consent for the above named organization to obtain information regarding myself. This includes the following:

- Criminal background records/information
- Criminal background check/fingerprint
- Sex Offender Registry Checks
- Addresses
- Employment records/ employers references
- Driver's license check
- Training / experience
- Personal references

I the undersigned, authorize this information to be obtained either in writing or via telephone in connection with my volunteer application. Any person, firm or organization providing information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with the organization's guidelines.

Print Name: _____ Date: _____

Signature: _____

Fort Lupton Recreation Enterprise Waiver of Liability

I, _____, acknowledge that I am a **VOLUNTEER** at the Fort Lupton Recreation Center of my own free choice. In order to be a **VOLUNTEER**, I hereby assume all risk of personal injury or death and do also release and agree to hold harmless the City of Fort Lupton, the Fort Lupton Recreation Enterprise, its employees and officials from any and all liability for any damage or injury that I receive while volunteering for the Fort Lupton Recreation Center. This assumption of risk release of liability agreement applies to any right of action that might arise to me, my heirs, and my personal representatives against the above named entities and persons.

Further, I agree to obey the directions of the supervisor in the performance of my duties.

DATE: _____

PRINT NAME: _____

SIGNATURE: _____

WITNESS: _____

If the **VOLUNTEER** is under the age of eighteen (18) years of age, I, as parent, guardian, or legal custodian of the minor signing the waiver of liability as stated above, do hereby consent to the terms therein stated on behalf of myself and the minor.

DATE: _____

SIGNATURE: _____