

# San Angelo Soccer Association Coach Application

Request the position of: (CIRCLE ONE) COACH or ASSISTANT COACH

Seasonal Year: **Fall** 20\_\_\_\_\_ or **Spring** 20\_\_\_\_\_

TEAM NAME: \_\_\_\_\_ Age Group: U-\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Current Coaching License Level:** (circle one)

A B C D E F G

Date when you received license: \_\_\_\_\_

References: (other than a family member)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I willingly enter into this contract & pledge to set the highest example of sportsmanship & integrity for the children of the San Angelo Soccer Association (SASA). I will strive to help each child reach his/her potential so that the child will gain self-respect & confidence. I further understand, support & will comply with the playing rules & rules of registration as established by this Association & its Board of Directors under the guidelines of the Constitution & by-law's. Above all else, I will remember that soccer is a game, & is for the enjoyment of the children. **By being granted & accepting this position of coach or assistant coach, I recognize there are certain other responsibilities that go with the position. I will explain to my team's parents, guardians & /or spectators, that is a gentleman's sport!! Profanity, alcohol beverages or disrespectful language of any form or actions towards a participant, including their own child, or an official is NOT tolerated & they may be asked to leave the jurisdiction of SASA.** I will encourage the parents of my players to learn the laws of the game through attendance at coaching or referee clinics. I will encourage my teams' participation in fundraising activities sponsored by SASA. I will serve as the communication link between my team & the SASA Board of Directors. My duties shall be passing information to the team from the Board & passing suggestions to the Board from my team. I will strive to enhance my coaching ability through the attendance at coaching clinics or other study. I will notify my team of their new coach within seven days of my receipt of notification. I have read, understand, and agree to uphold this contract by my signature.

\_\_\_\_\_  
Printed Name Signature Date

I HAVE:

- Completed the North Texas Risk Management Form (found on the SASA coach's website page)
- Attached a copy of my Driver's License with this contract
- A copy of the COACHES CODE OF ETHICS (can be downloaded from website - [www.sanangelosoccer.org](http://www.sanangelosoccer.org) - under coaches forms)

The security of your information is a priority to SASA. We would like to distribute, to the other coaches in your age group: your name, phone number, e-mail, and team name, on a coaches listing sheet. Please be aware the sharing of this information is intended to allow contact between coaches, to reschedule games or to share pertinent information. Do we have permission to distribute only the above listed information, to your fellow coaches in your age group? YES or NO

\_\_\_\_\_  
Printed Name Signature Date