

ALL AMERICAN YOUTH FOOTBALL AND DRILL TEAM
(AAYFDT)
Coach / Instructor Application

Name: _____ Phone: _____ (Home)

(Work)
Address: _____

(Cell)

1) Booster Club and Team: _____

2) Booster Club/AAYFDT Positions: (past and present)

3) Please list any other experiences that would further qualify you for the requested position:

4) Answer the following:

- | | | |
|--|-----|----|
| a) Are you free of illegal substance abuse? | YES | NO |
| b) Have you ever been convicted of a criminal offense? | YES | NO |
| c) Have you ever been arrested or convicted for the use or sale of illegal substances? | YES | NO |
| d) Have you ever been hospitalized/treated for the use of illegal substances? | YES | NO |
| e) Have you ever been arrested for or convicted of child neglect or abuse? | YES | NO |
| f) Has your driver's license ever been suspended or revoked? | YES | NO |
| g) Is there anything else in your past that would question our entrusting you with children? | YES | NO |

Explain any 'YES' answers below (except 4a):

5) Supply names / phone numbers of at least 3 references on the back. Read the following carefully prior to signing.

I, the undersigned, understand that in signing this application I confirm that the information I have given is true and correct. Also, the information I have provided may be verified and I will hold no person or organization liable for the information provided to the Booster Club or AAYFDT.

Signature: _____ Date: _____

5) Annual Update: The information provided has not changed to the best of my knowledge.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Booster Club Approval

Signature: _____ Date: _____