

Albion Soccer Club Coaching Application

This application will inform the ASC Board of your desire to coach a team in the indoor and/or summer season. All prospective coaches must complete the following Coaching Application to be considered for a coaching position with the Albion Soccer Club. Please fill out this application completely. Coaches with children playing on a team will not be required to coach a team other than his or her child's team.

Last Name: _____ First Name: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Email Address: _____ Date of Birth _____

Please circle your answer for the following questions.

Are you interested in being a: Head Coach / Assistant Coach / Team Manager

Are you interested in coaching: Winter Indoor Summer Both

What Age Group do you wish to coach?

Boys: U4 / U6 / U8 / U10 / U12 / U13 / U14 / U15 / U16 / U17 / U19

Girls: U4 / U6 / U8 / U10 / U12 / U13 / U14 / U15 / U16 / U17 / U19

Would you coach a different age group if you don't have a child playing in the group you choose to coach?
(YES / NO)

Do you have Coaching Experience? (YES / NO)

If you have experience please describe: _____

How well do you know the Game and Rules of Soccer? _____

Did you play soccer? (YES / NO) If yes please describe: _____

Would you be willing to attend a coaching clinic? (YES / NO)

Are you now or have you ever been a soccer referee? (YES / NO)

Is there any other info you would like to tell/share with us? _____

Signature: _____ Date: _____