

Skagit County Parks and Recreation

1730 Continental Place – Mount Vernon, WA 98273 360-416-1350– <u>parksrec@co.skagit.wa.us</u> www.skagitcounty.net/parks

YOUTH VOLUNTEER COACH CONTRACT

I._______, wish to participate in the Skagit County Parks & Recreation <u>S.W.I.S.H. Basketball League</u> program, as a volunteer coach. I hereby recognize that youth volunteer coaches serve a vital need in helping provide positive recreation activities for youth. Further, I understand that serving as a volunteer coach, I will be setting examples for the youth I am coaching, and will strive to uphold a high set of ideals and standards in regards to sportsmanship and fair play. I agree to abide by all rules and procedures set forth by the Skagit County Parks & Recreation Department, including:

- 1) Not using, or being under the influence of alcohol or using tobacco products while being associated with this program, including games, practices or league meetings.
- 2) Not using profanity, obscene gestures or comments, or abusive language to players, parents, officials, league administrators or any other persons associated with this program.
- 3) Striving to always be positive towards my players and treating each player fairly, realizing that each player has the right to have fun.
- 4) Stressing the importance of sportsmanship and fair play while teaching skill development and teamwork. Wanting to win is O.K., but not at the expense of the ideals and fundamentals of the game.
- 5) Certify that I do not have a criminal background that prohibits my working or associating with youth, or have displayed any improper conduct that should prohibit my working or associating with youth.
- 6) AGREE TO ALLOW A BACKGROUND CHECK BY THE SKAGIT COUNTY PARKS & RECREATION WITH THE STATE OF WASHINGTON AND/OR PROTECT YOUTH SPORTS.
- 7) I assume all risks of injury incurred or suffered by me while at or participating in this activity.

I have read this document in its entirety, and agree to abide by all terms of this agreement. Further, I realize that failure to abide by any or all of the above items are grounds for termination of this position. My signature below verifies this fact.

Name (print)	Date of Birth/	/
Signature		
Driver's License #	Social Security #	
Address Street	City	Zip
Day Phone	Evening Phone	
E-Mail		