

London Ramblers Basketball Coaching Application

607 Grenfell Drive, London, ON N5X 2V2, www.londonramblers.com

Name: _____

Street Address: _____

City: _____

Postal Code: _____

Email: _____

Home Phone #: _____

Cell Phone #: _____

Date of Birth: Month _____ Day _____ Year _____

Coaching #: **CC** _____

Special training, skills, certifications (CPR, Medical, etc.) _____

Community Affiliations (Clubs, Service Groups, etc.): _____

Previous Volunteer or Coaching Experience: _____

Do you have a valid driver's license? Yes No

House League Director Camp Director

House League Coach Camp Coach

Competitive Head Coach Competitive Assistant Coach

List 2 references of which at least one has knowledge of your participation as a volunteer in a youth program:

Name: _____ Phone# and/or email: _____

Name: _____ Phone# and/or email: _____

Applicant Signature: _____

Applicant's Name (please print): _____

Date signed: _____

