

Application to Coach a Thunderbird Basketball Team

Date: _____

Name: _____

Address: _____

City: _____

Phone: home: _____ work: _____

cell: _____ fax: _____

Email Addresses: _____

Child's Name(s): _____

Boys Girls Grade(s): _____

Prior Thunderbird Basketball Coaching Experience

Other Basketball Coaching Experience

(Over)

Other Coaching Experience (Any Sport)

Knowledge of Basketball Rules:

- _____ none
- _____ beginning
- _____ moderate
- _____ advanced

Want to Coach with whom? _____

	Yes	No
Willing to attend Coach Training Classes	<input type="checkbox"/>	<input type="checkbox"/>

Coaches' Shirt Size _____ (AM, AL, AXL, 2XL, 3XL)