

**Coaching Application**      **Traveling**\_\_\_\_\_ **In-House**\_\_\_\_\_**First Name**\_\_\_\_\_ **Middle Initial**\_\_\_\_\_ **Last Name**\_\_\_\_\_**Address**\_\_\_\_\_**Telephone**\_\_\_\_\_ **Cell Phone**\_\_\_\_\_ **Email**\_\_\_\_\_**Coaching position you are interested in:** \_\_\_\_\_

Soccer Coaching Experience:

#Years\_\_\_\_ boys\_\_\_\_ girls\_\_\_\_ age(s)\_\_\_\_ InHouse\_\_\_\_ Traveling\_\_\_\_

Soccer Coaching Experience:\_\_\_\_\_

\*\*Coaching experience is not necessary. Please indicate no experience and we can provide you with coaching materials and/or mentoring.

Go to [WWW.SABOOSTERS.ORG](http://WWW.SABOOSTERS.ORG) and click on the soccer page. Under Coaches Corner you will find a list of all required documents needed to coach.

By signing this form you are agreeing to a criminal background check and promising adherence with SAVSB/SASB policies, procedures, and code of conduct, including our playing time guidelines, ([reasonably balanced for all grade levels](#)). You are also indicating you have sufficient time, and abilities, to coach a youth soccer team and traveling coaches are willing to travel as expected by the MYSA schedule you are given. Please note the SAVSB reserves the right to terminate any Head Coach or Assistant Coach position at any time.

After evaluations and team selection, coaches are named according to where their child is placed. Thank you for your interest in coaching.

Signature\_\_\_\_\_ Date\_\_\_\_\_

**Please return: Completed Application, Concussion Training Certificate, Field Code of Conduct and signed Coaches Guidelines to:**

**TRAVELING COACHES:** Bruce Wells 2904 33rd Ave. NE St. Anthony, MN 55418**U10 Coaches:** Kim Nogosek 3321 Croft Drive St. Anthony, MN 55418**U8 Coaches:** Stephanie Walbridge 3301 Croft Drive St. Anthony, MN 55418**U6/U4 Coaches:** Mary Przybilla 3420 Croft Drive St. Anthony, MN 55418