

Upward Basketball Coach and Referee Application SPORTS VES Uplan to coach Upward Basketball VES Uplan to referee Upward Basketball

Name					
Mailing Address					
City			State _		Zip
Phone (day)	ening)		(cel	(cell)	
Email Address					
Are you a member of a local ch	urch? Tes	☐ No	If yes, wher	e?	
Gender: M F	Date of Birth	/			
Section 2 (please cire	cle)				
Mark which league you pre evaluation will you attend		n a "C." Ma	rk which league	you prefer to referee	e with an "R." Which
Division		Boys	Girls		Evaluations
Kindergarten		(Co	o-Ed)		Time:
1 st and 2 nd Grade	_			•	Time:
3 rd and 4 th Grade 5 th and 6 th Grade	_				Time: Time:
5. Please list your children w	ho will be playing Grad			ketball league, if appl I plan to coach my	
Child's Name 6. Have you ever coached Up	Grad	e G M M M M before? Y	r's Upward Bas ender 1 F 1 F 1 F 'es No		icable. child's team o
6. Have you ever coached Up 7. Have you ever refereed Up	Grad Grad Gward Basketball	e G N N N before? Y	r's Upward Bas ender 1 F 1 F 1 F 1 F 1 F 1 S 1 F 1 S 1 NO 1 S 1 NO	I plan to coach my Yes N Yes N	icable. child's team o
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