

DATE _____	Cell Phone _____	Home Phone _____
Name _____		
Address _____	City _____	Zip _____
DOB _____	SS# _____	Division Coaching _____
Email Address _____		(Please Print Clearly)

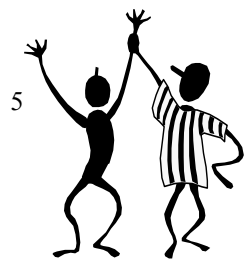
Lake County Hoops Basketball League
Volunteer Rules Of Operation For ALL Coaches, Managers, And Volunteers

- Smoking or the use of tobacco products is **Off School Property** and then in designated areas only.
- Using, possession, or being under the influence of alcohol or illegal drugs will not be allowed or tolerated and I shall be terminated immediately.
- Volunteers shall not abuse participants or other volunteers including but not limited to:
 - Physical Abuse –Striking, Spank, Shake Or Slap.
 - Verbal Abuse – Humiliate , degrade, or threaten
 - Sexual Abuse – Including inappropriate touching, exposure and verbal.
- Volunteers will equally treat participants of all races, religions, and cultures with respect and consideration and will promote equal playing time of players.
- Volunteers must use positive techniques of guidance, including positive reinforcement and encouragement rather than competition, comparison, or criticism.
- Volunteers shall not use profanity in the presence of participants.
- Volunteers will portray a positive role model for participants by maintaining an attitude of respect, loyalty, patience, integrity, courtesy, tact and maturity.
- Volunteers understand that their actions are judged, as others perceive them and any unpleasant action on the part of a volunteer will reflect on the whole league and our community.
- Volunteers will immediately report any accident or injuries to self, participants, spectators or volunteers to a Board Member of the Lake County Hoops Basketball League.

The Board Of Directors of Lake County Hoops Basketball League shall have the right to approve, reprimand, bar, or dismiss coaches, assistant coaches, managers, referees, players, spectators or volunteers at its discretion. I also give my permission for South Lake Recreation to do a criminal background check on me if they feel it is necessary. I also understand that I must attend the coaches meeting when requested to and at least one coaches instructional / rules meeting, if offered.

I acknowledge that I have received a copy of these rules and any violation of these rules maybe grounds for my removal as a Volunteer with Lake County Hoops Basketball League.

_____ **Date** _____ **Date** _____
 _____ **Witness** _____



**Coaches, Assistants Coaches, Managers and
Volunteers Agreement.**

Lake County Hoops Basketball League

I, _____ do hereby agree to coach, volunteer or manage for Lake County Hoops Basketball League and for the duration of League play I shall honor the Leagues objectives of scholarship, sportsmanship and physical fitness. I further agree to conduct myself as a responsible adult, good sport and a role model for my players. I understand that I am representing Lake County Hoops Basketball League, and that any unpleasant action on my part will reflect upon the League and our community resulting in my dismissal from my squad. **I understand that if I am ejected from a game I will not be allowed to participate or be present at the following game.** I understand that if I am ejected a second time from a game the Board Of Directors of Lake County Hoops Basketball League shall have the option to replace me as a coach for the remainder of the season.

I understand that my obligations as a coach include the following:

I will locate a team parent and turn that person’s name in **before I start practices.** If Lake County Hoops Basketball League finds it necessary to establish a Concession Stand, I understand that I or my team parent will be responsible in covering a time schedule and if my team fails to cover my designated time I will be charged a fee or FORFIET my last game. I will participate and support any fundraisers the league may feel necessary to raise money.

Practices And Games At The Schools:

I understand that when my team practices no one else other than another scheduled team is to be in the stadium/gym/facility or on school property, if there is I am to ask them to leave. I also understand any player suspended from school shall **not** attend practices, games or be on school property while on suspension. Any accident, injury or incident that may happen while I am present is to be reported to a Board Member **Immediately.** When I leave fields, or stadium/gyms/facilities I will check all doors gates and windows and will make sure they are locked, lights and fans are turned off and all fences or gates are secure. I will check to make sure that no person is left inside the stadium/gym/facility. I will instruct my players to stay in our designated practice area and not to disrupt anyone else’s practice. If I am the last to leave a gym/facility I will make sure **all participants** have gone and **will not leave** till the last one is secured by their parent or guardian.

Date _____

Signature