



Norman Optimist Club
Recreational Basketball Leagues

TEAM Assigned: _____
By: _____

Coaches Application

Name: _____ Date: _____

Home Address: _____ City _____ Zip _____

Home Phone: _____ Mobil or Pager: _____

Work Address: _____ City _____

Work Phone: _____ Mobil or Pager: _____

Email Address: _____

I **AM** **AM NOT** a member of the Norman Optimist Club
(Circle one)

Team Requested: Boys Girls (Circle one)

Grade: 2 3 4 5 6 7 8 High School (Circle one)

School or Area Requested: _____

I **DO** **DO NOT** have child or dependent in the program (Circle one)

Name of Child: _____ School: _____ Grade: _____

Coaching Experience

NOTE: Previous coaching experience is NOT a prerequisite for coaching in this program. A general knowledge of the game, desire to work with young people, and a willingness to learn are all that is necessary. Exhibiting good sportsmanship and appropriate behavior are prerequisites and are to be given the highest priority.

I, the undersigned, agree to obey all of the rules of the Norman Optimist Club program and to accept the responsibility for the actions of my team, assistant coaches, and parents, and at all times keeping the ideals of good sportsmanship as the primary consideration. I also understand that repeated violation of these rules can result in my suspension as a coach.

Signed: _____ Date: _____