



City of Cheyenne  
Recreation Division  
1317 Parsley Blvd.  
Cheyenne, WY 82007

## 2021 Cheyenne Youth Volleyball League Coaches Application

Name: \_\_\_\_\_ Phone Number(s): \_\_\_\_\_

Male      Female      (If female please list maiden name and any previously married names)

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

D.O.B: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Have you had previous coaching experience or opportunities to work with children before?      Yes      No

If yes, name of organizational league: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of person in charge: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Please list any criminal history you may have: \_\_\_\_\_

I would like to coach my child's team. Child's name: \_\_\_\_\_

\*League breakdown is subject to change depending on registration number, and availability of coaches. Therefore, some grades may be combined differently if an insufficient number of players sign up in a specific grade group. The Recreation Division reserves the right to refund player fees and eliminate teams from the league where and/or when coaches are not available.

\*As your team's Head Coach, you are allowed to pick your teams name and color. Colors may be changed due to the color options offered by the printing company.

Team Name: \_\_\_\_\_ Team Colors: \_\_\_\_\_

### **All volunteers will be subject to a Criminal Background Check by the City of Cheyenne Police Department**

*By signing this application, I acknowledge that I have read the following documents presented to me (Affidavit, Consent & Release, Letter of Understanding & Policy Statement) and hereby give written consent to the City of Cheyenne to conduct a criminal background check including the Wyoming Sex Offender Registry & National Sex Offender listing.*

The undersigned hereby agrees to release the City of Cheyenne and the Recreation Division against any and all claims for loss, injury, or damage to persons or property arising out of the activities engaged in by the undersigned as part of Cheyenne Recreation Division program activities.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Please call with any questions you may have, and return on or before **September 3rd, 2021** to:  
Recreation Specialist David Mullen / [dmullen@cheyennecity.org](mailto:dmullen@cheyennecity.org) (307) 773 - 1039