	Valley ECREATION	Parks and Recr	Apple Valley eation Departmen oach Application	t Make Life Better!		
Sport:	BASKETBALL	VOLLEYBALL	Season/Year:			
<u>League D</u>)esired : Boys or G	irls? 3-4 (Pee Wee); 5-6 (Hot Shot); 2 nd ; 3-4	th ; 5-6 th ; 7-8 th ; High School		
Circle On	e: Head Coach or	Assistant Coach. If	assistant coach, for who	om:		
Name:				Date:		
Name of	child(ren):					
Address:						
	Street		City	Zip Code		
Daytime Phone:			Evening Phone:			
E-Mail A	ddress:					
			hing desired sport(s):			
Please lis	t any additional v	olunteer experienc	e:			
The P	ecreation Den	ortmont will rov	iew all Volunteer Co	ach Applications and		

The Recreation Department will review all Volunteer Coach Applications and select the most qualified applicants for a coaching position. All coaching selections are contingent upon a successful Livescan background check and brief interview with program supervisor.

Once the background check process is complete, the program supervisor will schedule a league-wide new coach orientation and coaches meeting with all league coaches, officials, and staff.

(Please see page two for the Release of Liability, Assumption of Risk and Photo Release)

RELEASE OF LIABILITY, ASSUMPTION OF RISK, AND PHOTO RELEASE

The Town provides a full spectrum of recreation, sport, educational and equestrian programs for children, teens, adults and families to help create "A Better Way of Life." In consideration for the Town, permitting me, my children, or children for whom I have capacity to contract ("Participant(s)") to engage in Town recreation programs on and off Town facilities, I understand and agree to the following:

RELEASE OF LIABILITY. I hereby release, indemnify, defend, and hold harmless the Town of Apple Valley, its elected and appointed officials, its officers, clients, employees, agents, and volunteers ("Released Parties"), from any and all liabilities, claims, demands or causes of action (including attorneys' fees) that Participants may hereafter have for injuries and damages arising out of participation in any activities held at Town facilities or as part of a Town recreation program including, but not limited to, losses caused by the acts or omissions of the Released Parties or of obvious or hidden defects or dangerous conditions in Town facilities or Town recreation programs. This release shall release the Released Parties from related activities not conducted on Town property, including travel and off-site activities.

ASSUMPTION OF RISK. I understand that use of Town facilities and recreation activities may involve risks and dangers to Participants that no amount of care, caution, instruction or expertise can eliminate. I expressly and voluntarily assume all risk of injury or illness to Participants from any activity held at Town Facilities or as part of Town recreation programs. The Town is not responsible for any loss, theft or damage to personal property or Town equipment, articles, or facilities while Participants use said equipment, articles and/or facilities. I am aware that special interest classes are conducted by independent contractors, not Town personnel.

PHOTO RELEASE. I understand that from time to time Town representatives may photograph Participants at Town facilities and recreation programs. I acknowledge that by using Town facilities or participating in Town recreation programs, I authorize the Town of Apple Valley to take photographs of Participants and use or publish the photographs in the Town's publications, including its flyers, videos, or on websites. I understand that I will not receive any compensation for such use.

This release shall remain in effect until revoked and shall extend to all Town facilities and recreation programs that Participants may participate in. A copy of this release may be used to the same extent as the original. I certify that I have read and understand this release as it applies to me and to any minors for whom I am responsible (who are listed below).

Signed: ______ (Printed Name: ______)