

WINNETKA PARK DISTRICT HOUSE LEAGUE YOUTH BASKETBALL COACHES FORM

PLEASE PRINT

Name _____ E-mail Address _____

Street Address _____ City _____ Zip _____

Home Phone _____ Work Phone _____

What age group are you interested in coaching? *(Please check)*

3rd/4th Girls 5th/6th Girls 4th Boys 5th/6th Boys

What is your coaching preference? Head Coach Assistant Coach

Have you coached for the Winnetka Park District before? Yes No

Are you A.S.E.P. certified? Yes No

Do you have a preferred practice night or time? _____

Are You A High School Student?

Yes No

If yes, grade:

Junior Senior

Please return this form to: Winnetka Park District, 540 Hibbard Road, Winnetka, IL 60093

For Questions Contact Greg Sauber at gsauber@winpark.org or 847-501-2040