

**Club Name:**

**STRICTLY CONFIDENTIAL - Leader/Coach information form**

**Personal information**

Name: \_\_\_\_\_

Maiden name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth: // Gender: Male  Female

Mobile phone number: \_\_\_\_\_

E mail address: \_\_\_\_\_

Place of birth (Country, City, Town): \_\_\_\_\_

What is your previous experience or involvement in our cub? eg: parent, helper, member etc.

What other clubs have you been involved with in the past and what was your role?

Do you have any qualifications or skills that will benefit our club? eg: coaching, first aid etc.

Do you agree to abide by the guidelines contained in the Code of Ethics and Good Practice for Children in Athletics?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Do you agree to abide by the rules and recommendations of the Athletic Association of Ireland?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been asked to leave a sporting organisation in the past? (If you answer yes we will contact you in confidence)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a criminal offence or have a case pending? (If you answer yes we will contact you in confidence)	Yes <input type="checkbox"/>	No <input type="checkbox"/>

As a youth leader or coach it would be very useful to provide us with the names of two people who are happy to endorse your application to work with children

1) Name: \_\_\_\_\_ Club: \_\_\_\_\_ Phone: \_\_\_\_\_

2) Name: \_\_\_\_\_ Club: \_\_\_\_\_ Phone: \_\_\_\_\_

