



WASHINGTON PARK DISTRICT League Athletics Coach Questionnaire

Name: Address: Home Phone: Cell Phone: E-mail Address: Please answer all of the following questions. Type your answers in the box below each a separate sheet of paper. 1. Why do you wish to coach this team? 2. At what levels have you played the sport you are interested in coaching? 3. At what levels have you coached the sport you are interested in coaching (and number of the sport you had that may benefit you as a coach of the sport you had that may benefit you had the sport yo	Softball
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Please describe your philosophies concerning the		ing.		
5. Players missing practice and/or games for family activ	vities:			
6. Players missing practice and/or games for other sports	r (i e bo	skathall	soccer):	
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7. Playing time at the travel level, if applicable:				
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8. Discipline:				
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9. Winning:				
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10. Will you abide by the rules and scheduling guidelines establishe	ed by the	Washingto	on Park District as they	
apply to your team?				L
11. Will you assist & participate in Washington Park District fundra	aising acti	vities ben	efiting all Washington	
Park District programs, AND will you comply with fundraising			oning an washington	
12. The Washington Park District may host tournaments during the	season. V	Vill you as	ssist with pre-and post-	
tournament activities as needed?				
13. I understand any money raised by travel teams is in the name of	Washing	ton Park l	District and is to be used	
only for valid and necessary team expenses, and the money does				
		**		
Signature:		Date:		

Please return this questionnaire to the Washington Park District by close of business hours on the advertise deadline. You will be contacted regarding your interview time slot with the Washington Park District sport specific committee.