



### AYSSP Coaches Application

**\*\*\*Form will not be accepted unless all areas are completed. Please Print.**

I am applying for the position of Arkansas Youth Shooting Sports Coach

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State **Arkansas** Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

E-Mail: (please print legibly) \_\_\_\_\_

County \_\_\_\_\_ D.O.B \_\_\_\_/\_\_\_\_/\_\_\_\_ Male  Female

Employer \_\_\_\_\_

Supervisor's Name \_\_\_\_\_

Are you an active certified Hunter or Boating Education Instructor? YES  NO

Will you be assisting a coach with an existing team? YES  NO

If yes, please list the name of the coach. \_\_\_\_\_

If no, will your team be affiliated with a public school? (please list school) \_\_\_\_\_

Check the division you are interested in coaching. Junior  Senior  Both

**I agree that the above information is true and by signing this application I agree to follow and be bound by all rules terms and condition of the AYSSP Rule Book.**

Signature \_\_\_\_\_ Date \_\_\_\_\_