



Traveling Basketball Club

COACHES APPLICATION

All applicants must attend our MANDATORY Coaches Clinic. Your application must be turned in prior to this meeting.

Name _____

Telephone (home/ cell/ work): _____

E-mail Address _____

Mailing Address _____

Applying for: _____ Head Coach _____ Assistant Coach Grade Level _____

Note: There are typically 2 practices per week beginning in October with 7 - 11 weekend tournaments that run through the end of March.

Do you foresee any conflicts with the time commitment required to coach traveling basketball? Yes / No

If yes, please explain _____

Please list your basketball playing experience _____

Please list prior coaching experience - sport and number of years _____

IMPORTANT INFORMATION

- All coaching applicants will be subject to a background check
- All coaches will be required to attend our mandatory Coaches Clinic

SIGNATURE

DATE

Please submit completed form to: hlwwlakerbasketball@gmail.com or to Leon Decker

Please share your philosophy regarding the following:

Playing Time _____

Winning _____

Discipline _____

Player Attitude _____
