



NORTHWEST INDIANA UNITED FC

RETURNING COACHES APPLICATION

Spring 2004 SEASON

PLEASE PRINT

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone (H) _____

Phone (W) _____

Cell _____

Fax _____

E-Mail _____

Applying for: (circle choices)

Boys/Girls

Head Coach/Assistant Coach

U-9 U-10 U-11 U-12 U-13 U-14 U-15 U-16 U-17 U-18

Coaching Experience:

Formal Training/Licenses: (Provide a copy of certificate if not currently on file)

Thank you for volunteering!