

Offical Use Only		
Child Protection Cert?	Y / N	
Garda Vetted ?	Y/ N	

KILLORGLIN AFC

Volunteer Coach Application & Self Declaration Form (Page 1 of 2)

(Please use block capitals)

Name:	D.O.B	
Address:		
Tel. (H) (M	lobile)	
E-Mail		
Coaching Qualifications		
Sport	Award Held	Date of Award
Previous experience/involvement in spo	ort? Please give details.	
Have you ever been asked to leave a spo (If you have answered yes we will contact you in confider	0 0 1	No
Have you ever been convicted of a crimi	inal offence? If so give details	
(Having a criminal record does not necessarily preclude anyone f	from working with children. If you have answered "yes" you will be cont	tacted in confidence)



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Referee: Please supply the names, addresses and telephone numbers of two people whom we can contact and who from personal knowledge is willing to support your application.

(If you have had a previous involvement in sport, one of these names should be that of an administrator/leader of your last club/place of involvement)

Name	Title	Tel
Address		
Name	Title	Tel
Address		

I agree to work within Football Association of Ireland/Killorglin AFC Rules and FAI approved codes of conduct & best practice guidelines. I also agree that I will refrain from getting involved in any behaviour that could bring the name of Killorglin AFC or the sport of soccer into disrepute.

Signed:_____ Date: _____