

**2017-2018 BUDDY WERNER LEAGUE - VAIL/BEAVER CREEK
JUNIOR COACHES APPLICATION**

PARTICIPANT

Junior Coach # 1: Last Name _____ First Name: _____
Male__ Female__ Grade: _____ Age (as of 12/31/16): _____ School _____
Skier Level _____ Sweatshirt Size: _____ E-mail Address: _____
Special Requests (Specific team or area of interest): _____

Junior Coach # 2: Last Name _____ First Name: _____
Male__ Female__ Grade: _____ Age (as of 12/31/16): _____ School _____
Skier Level _____ Sweatshirt Size: _____ E-mail Address: _____
Special Requests (Specific team or area of interest): _____

PARENT

Parent #1: Name: _____
Phone: Home _____ Cell _____ Email: _____*

Parent #2: Name: _____
Phone: Home _____ Cell _____ Email: _____*

***We will e-mail the parents as well as the Junior Coach. Please check which e-mail you would like BWL to use for Jr. Coaching information.**

Mailing address: _____

City/State/Zip: _____

Please list two additional contacts in case of emergency:

Name: _____ Phone: _____

Name: _____ Phone: _____

Please explain why you would like to be a BWL Junior Coach for the 2017-18 season?

What are you hoping to get out of this experience?

It is important that all Junior Coaches read the Coaches Handbook so they can abide by the rules/guidelines set forth in the 2017-2018 as well as attend Off-Snow and On-Snow Coaches Training. Please sign below:

Signature of Junior Coach Applicant: _____ Date: _____

Signature of parent: _____ Date: _____

If you ordered a Brand New Arctica Jacket this summer, please include \$50 with this application. If you didn't pre-order but would like one, we might be able to get you one. Size?__ Please include \$50 with this application.

OFFICE USE ONLY

BWL Liability Release: _____ BWL Medical Authorization: _____
VR Liability Release: _____ Photo Release: _____
Training: DL _____ OS _____ Conc _____ Jacket Size _____ Paid ___Yes ___NO