

**La Feria Youth Basketball League**

115 East Commercial Avenue

La Feria, Texas 78559-5002



**ALL Fields must be completed.**

**Please Print Clearly**

**Coach Registration & Background Check**

Name: \_\_\_\_\_  
(PLEASE PRINT)

Gender: Male      Female      Birth Date (MM/DD/YYYY): \_\_\_\_/\_\_\_\_/\_\_\_\_

SSN: \_\_\_\_\_      DL: \_\_\_\_\_  
**(REQUIRED- for Background Check)**

Coach Type (circle one):      Head Coach      Assistant Coach

Physical Address: \_\_\_\_\_

City: \_\_\_\_\_      Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_  
**(REQUIRED)**

**Returning: YES \_\_\_\_\_ NO \_\_\_\_\_**

I agree that all the above information is correct and I understand that as a requirement to be a coach in the La Feria Youth Basketball League a background check will be performed and evaluated to determine my eligibility to coach in this league, and as such, I am aware that the submission of this form does not guarantee me a position as a coach in this league.

\_\_\_\_\_  
**Coach Signature**

\_\_\_\_\_  
**Date**

**Division:** \_\_\_\_\_