

2024-25 HERMISTON AAU BASKETBALL CLUB COACH/VOLUNTEER REGISTRATION FORM

Coaches – you must go to aausports.org and purchase an AAU card. We are no longer able to purchase coach cards for you – they must be purchased by each coach. Cards may take up to 21 business days to be approved – please plan accordingly as you are NOT allowed to practice or enter tournaments w/o a valid AAU card. Please forward the approved card to us. VERY IMPORTANT!

| Volunteer Name (Last, First, Middle) | | AAU Card Number (please email copy) | | |
|---------------------------------------------------------|---------------------------|--------------------------------------------|---------|---------------|
| Volunteer Address | | City, | State, | Zip |
| Home telephone | Cell Phone | Email address – very important for contact | | |
| Past volunteer experi | ence (please list dates | s and positions he | ld) | |
| Personal Reference (| please list three names | s and telephone n | umbers) | |
| Volunteer position (coach, asst coach, team parent, boa | | rd member, other) Team Age / Team Name | | |
| Medical Insurance Carrier | | Physicia | n | Dr. Telephone |
| | ver been convicted of any | | • | |

I certify that: (1) I have never been convicted of any sex offense nor felony; or, if so, I must apply for membership (and receive approval) through the AAU National Office; and, (2) this application is correct in every material aspect. The applicant agrees to be bound by the Hermiston Basketball Club Code, the AAU Code, including all AAU policies, which are available for review on the AAU website at <u>www.aausports.org</u>. If volunteer is less than 18 years of age parent/guardian signature is required. The applicant gives permission for a background check to be obtained by the Hermiston AAU Club, if deemed appropriate.