

**Lightning Soccer 2009**  
**COACHES INFORMATION FORM**

Date form being filled out: \_\_\_\_\_

[please **PRINT** neatly & **RETURN** as soon as possible to

**RALPH FERRIGNO, THE SOCCER OFFICE,**

**TUFTS UNIVERSITY, MEDFORD, MA 02155, U.S.A.**

[Updated form required by Board of Health for returning staff].



name: \_\_\_\_\_ age: \_\_\_\_\_

VISA Status in USA (if foreign): \_\_\_\_\_ date of birth: \_\_\_\_\_

social security number: \_\_\_\_\_ shoe size: \_\_\_\_\_

health insurance company & policy #: \_\_\_\_\_

shirt size : M L XL shorts size : M L XL

**Camp Use Only - Staff Check-List**

Signed Contract: \_\_\_\_\_ Photograph: \_\_\_\_\_

3 Recommendations: \_\_\_\_\_

CORI check: \_\_\_\_\_ SORI check: \_\_\_\_\_

Complete Health Questionnaire: \_\_\_\_\_

home address (include zip/postal code & country), college students include campus address also:

\_\_\_\_\_  
\_\_\_\_\_

home# : \_\_/\_\_/\_\_\_\_ cell#: \_\_/\_\_/\_\_\_\_ work or campus#: \_\_/\_\_/\_\_\_\_

e-mail: \_\_\_\_\_

highest coaching licences held (please include photocopies of license certification if applying first time):

\_\_\_\_\_  
\_\_\_\_\_

coaching experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

playing background: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

other relevant qualifications & experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

*please fill-out availability form over the page*

# Lightning Soccer 2009

## STAFF AVAILABILITY



Camp Itinerary for \_\_\_\_\_

Please fill-in name & indicate the weeks of your availability

Circle one of 2 options below first:

1). Full Summer (wk 1-6)

Preferred option for British staff coming through BUNAC.

2). As available

Weeks interested in circled below.

<u>Date</u>	<u>Site</u>	<u>Level</u>	<u>Availability (circle)</u>	
20-24 April	TUFTS UNIVERSITY (9am-12noon)	HALF-DAY CAMP	YES	NO
20-24 April	SOCCER ETC, BEVERLY (1:30-4:30pm)	HALF-DAY CAMP	YES	NO
13-17 July (wk1)	THE PINGREE SCHOOL (9am-4pm)	DAY CAMPS	YES	NO
13-17 July (wk1)	TUFTS UNIVERSITY (9am-4pm)	DAY CAMPS	YES	NO
13-17 July (wk1)	MALDEN CATHOLIC (5-8pm)	EVENING HS CLINIC	YES	NO
20-24 July (wk2)	TUFTS UNIVERSITY (9am-4pm)	DAY CAMP	YES	NO
20-24 July (wk2)	SHORE COUNTRY DAY (9am-4pm)	DAY CAMP	YES	NO
20-24 July (wk2)	SHORE COUNTRY DAY (5-8pm)	EVENING HS CLINIC	YES	NO
26-30 July (wk3)	WORCESTER ACADEMY	OVERNIGHT CAMP	YES	NO
2-6 August (wk4)	CURRY COLLEGE	OVERNIGHT CAMP	YES	NO
9-13 August (wk5)	CURRY COLLEGE	OVERNIGHT CAMP	YES	NO
17-21 August (wk6)	HIGH SCHOOL CAMPS	HALF-DAY CAMPS	YES	NO

### Other Notes:

- |   |     |    |
|---|-----|----|
| 1). Can you supply your own accomodation in the area this summer? | YES | NO |
| 2). Do you have a valid, current driving license?                 | YES | NO |
| 3). Are you first-aid/CPR certified?                              | YES | NO |
| 4). Are you a qualified lifeguard?                                | YES | NO |
| 5). Will have access/use of your own car this summer?             | YES | NO |

Anything else of relevance? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_