

# CHAPEL HILL PARKS AND RECREATION DEPARTMENT

## FALL BASKETBALL TEAM REGISTRATION INFORMATION

Ages 16-18 Basketball team registration is taken on a first come, first serve basis. A maximum of 10 teams will be taken in the league. Packets turned in after the leagues have been filled will be placed on a waiting list. Players that are on school teams or listed on a school team roster are not eligible to play. All packets must be returned with the following items in order to complete the registration process.

**Registration Deadline:** Until full (max 10 teams) or October 25.

### TO COMPLETE REGISTRATION, THIS PACKET MUST BE TURNED IN WITH:

- Coaches application completely filled out by the coach.
- Team roster with team name, as well as names, addresses and phone numbers of a minimum 7 players/maximum of 12 players.
- Copies of birth certificates for all players
- Completed registration form for every player on the roster, signed by parent or guardian. Player agreement read and signed by each player.
- Payment of team fee- \$530 per team, and an additional \$5 per non-Orange County resident. Please write one check for the full amount, made payable to The Town of Chapel Hill.
- Packets that do not contain the above items are considered incomplete and will NOT be accepted for registration.

### IMPORTANT

All players will be required to show a photo id before EVERY game.

Any player who does not produce a photo id will NOT be allowed to play. No exceptions!



# CHAPEL HILL PARKS AND RECREATION DEPARTMENT

## YOUTH BASKETBALL COACHING APPLICATION

Please complete **ALL** information listed below. Incomplete applications or applications that have "refer to last year" will be returned.

<b>HEAD COACH NAME</b>	<b>PHONE (HOME)</b>
<b>LOCAL ADDRESS</b>	<b>PHONE (WORK)</b>

All Head Coaches must be 21 years of age.

<b>ASSISTANT COACH NAME</b>	<b>PHONE (HOME)</b>
<b>LOCAL ADDRESS</b>	<b>PHONE (WORK)</b>

Please circle the age group you would like to coach. Player ages are determined as of August 31, 2016. Please indicate 1st, 2nd, 3rd choice preference.

<b>CO-ED</b>	Ages 7-8			
<b>BOYS</b>	Ages 9-10	Ages 11-12	Ages 13-15	Ages 16-18
<b>GIRLS</b>	Ages 9-12			

### SPORTS EXPERIENCE AND PARTICIPATIONS

### COACHING EXPERIENCE

### RELATED INFORMATION YOU FEEL SHOULD BE CONSIDERED IN EVALUATING THIS APPLICATION

### REFERENCES-PLEASE DO NOT INCLUDE DEPARTMENT STAFF (GIVE NAME, TITLE, ADDRESS, PHONE)

If accepted for this coaching position, I hereby agree to abide by all rules and regulations set forth by the Chapel Hill Parks and Recreation Department and the decisions of the Parks and Recreation Department Staff.

\_\_\_\_\_  
Head Coach Signature      Date

\_\_\_\_\_  
Assistant Coach Signature      Date



# Town of Chapel Hill Consumer Reports Release



POSITION TITLE: \_\_\_\_\_

DEPARTMENT: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_

HR PARTNER: \_\_\_\_\_

**ILLEGIBLE FORMS MAY EFFECT YOUR TURNAROUND TIME. PLEASE MAKE SURE ALL INFORMATION IS COMPLETELY FILLED OUT SO WE CAN CONTACT YOU SHOULD THERE BE A NEED FOR VERIFICATION.**

First name: \_\_\_\_\_

Middle name: \_\_\_\_\_

Last name: \_\_\_\_\_

Suffix: \_\_\_\_\_

Maiden name: \_\_\_\_\_

Social security number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

Gender (circle one): male/female

Current address: \_\_\_\_\_

City: \_\_\_\_\_ state: \_\_\_\_\_ zip: \_\_\_\_\_ how long? \_\_\_\_\_

Previous address: \_\_\_\_\_

City: \_\_\_\_\_ state: \_\_\_\_\_ zip: \_\_\_\_\_ how long? \_\_\_\_\_

Driver's license # \_\_\_\_\_ state issued: \_\_\_\_\_ expiration date: \_\_\_\_\_

Candidate's email address: \_\_\_\_\_

## DISCLOSURE REGARDING BACKGROUND INVESTIGATION

The Town of Chapel Hill ("the Company") may obtain information about you from a third party consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal background, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying.

You have the right, upon written request made within a reasonable time, to request whether a consumer report has been run about you, and disclosure of the nature and scope of any investigative consumer report and to request a copy of your report. Please be advised that the nature and scope of the most common form of investigative consumer report is an employment history or verification. These searches will be conducted by FirstPoint, Inc., P.O. Box 26140 Greensboro, NC 27402, 800-449-0245, www.firstpointresources.com. The scope of this disclosure is all-encompassing, however, allowing The Town of Chapel Hill to obtain from any outside organization all manner of consumer reports throughout the course of your employment to the extent permitted by law.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Date of Birth and last four of SSN \_\_\_\_\_

## OFFICE USE ONLY BELOW THIS LINE

Requestor: \_\_\_\_\_ Date Requested \_\_\_\_/\_\_\_\_/\_\_\_\_ Date Received \_\_\_\_/\_\_\_\_/\_\_\_\_

Criminal Records    Credit Report    Motor Vehicle Record    Social Security Trace

Criminal Verifications.....Where?

1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Education Verifications.....Where? \_\_\_\_\_

Professional License Verifications.....Where? \_\_\_\_\_

Employment.....Where? \_\_\_\_\_

# CHAPEL HILL PARKS AND RECREATION DEPARTMENT

## BASKETBALL LEAGUE TEAM ROSTER

**Team Name** \_\_\_\_\_

**SEASON / YEAR** \_\_\_\_\_

**CIRCLE ONE**    Ages (10-12 yrs)    Ages (13-15 yrs)    Ages (16-18 yrs)

Head Coach _____ Address _____ Telephone (Home) _____ (Work) _____ (Email) _____
Assistant Coach _____ Address _____ Telephone (Home) _____ (Work) _____ (Email) _____

PLAYERS NAME	ADDRESS	COUNTY	PHONE
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

\*\*Minimum of 7 players are needed to form a team. Maximum of 12 players allowed on a team.

Fee: \$530 per team, additional \$5 for each non-Orange County resident



