

INSTRUCTOR FORM FOR HOOPZONE BASKETBALL *(Print Legibly)*

This form is for individuals who are wanting to work at HOOPZONE Basketball camps/events as a instructor or coach. Please fill out form completely.

Name: _____

Email: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Have you ever been convicted of any criminal act including sex-related or child-abuse-related offenses? YES NO

Age groups interested in instructing (check all that apply):

Age 4 – 2nd grade Grades 3-5 Grade 6-8 Grades 9-12

Season of year you are interested in working:

Summer camps Fall Ball camps Winter camps Travel teams

Basketball playing experience (in years): _____

Basketball coaching experience (in years): _____

How did you find out about HOOPZONE Basketball: _____

Additional Comments: _____

Mail form to: Bruce Owens • 8839 S. Circle E • Farwell, MI 48622

Thank you for applying!