Sharon Basketball Association
COACHING APPLICATION

First Name _____ Last Name _____

Address _____

Home Phone _____ Work Phone _____ Mobile Phone _____

Primary e-mail _____ Alternate e-mail _____

Child's Name _____ Sex (M/F) _____ Grade (as of this Fall) _____

Applying for (check one): Head Coach ☐ Assistant Coach ☐

Playing and Coaching Experience:

Other applicable skills, considerations or comments:

Please return the completed form to: SBA; c/o Jim Bender, 22 Juniper Road, Sharon, MA. 02067 or drop it off at the registration table at try-outs. If you have any questions, please send an email to jbender@sovereignbank.com . *There are a limited number of coaching positions that open up each year. The SBA Board, in their sole discretion, will review and select the coaching applicants.*