

CASTLEKNOCK CELTIC

Coach/Volunteer Application Form

Application to become:

Name:

Address:

Email address:

Telephone No: Landline:
Mobile

Date of Birth:

Do you consent to your personal details being held on file by Castleknock Celtic, tick appropriate box?

YES

NO

Previous experience/involvement in sport? Please supply details.

Name of Club	Dates	Job Title	Reason for leaving?

Previous experience/involvement in voluntary work related to children? Please supply details.

Name of Organisation	Dates	Nature of work	Reason for leaving

Reason for applying:

Have you ever been asked to leave a sporting organisation in the past?

Yes	
No	

(If you have answered yes we will contact you in confidence)

Please note that, Castleknock Celtic Football Club is an organisation committed to the welfare/protection and happiness of children, all appointments are subject to reference checks and when available, Garda clearance.

Referee:

Please supply the names of two responsible people whom we can contact and who from personal knowledge is willing to endorse your application. If you had a previous involvement in sport, one of these names should be that of an administrator/leader of your last club/place of involvement.

Referees Name/Address

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Signed:

Date: