



Coaches Application **2018-2019**

Name _____
Address: _____ City: _____ State: _____ Zip Code: _____
Home Phone: _____ Work Phone: _____
Mobile Phone: _____ Email: _____

*Thank you for your interest in coaching.
The information provided below, along with an interview with the Board of Directors, will help us make decisions regarding coaches.*

Please email your application to info@natickbasketball.com

1. Team applying to coach (please circle): 4 5 6 7 8 Boys Girls A B
2. Have you coached basketball? Yes No
3. If yes, how many years? _____ What age groups _____
4. Have you coached another sport? Yes No
5. If yes, what sport _____
6. Have you attended any coaching clinics? Yes No
7. If yes, what clinics _____
8. Did you play basketball in High School or College? Yes No
9. If yes, what school _____
10. For the age group that you would like to coach, what are your philosophies on playing time?

11. Do you have a child who would play on the team? Yes No

12. If so, what level do you feel is appropriate for him/her? A B

13. How would you describe a “successful” season?

14. What would be your players’ description of a “successful” season?

15. Going into a season, what are your primary objectives?

16. What do you think your players want to achieve from playing on your team?

17. What level of importance do you place on the following facets of youth basketball? Please mark most important, important and least important.

- Wins & Losses
- Player Development
- Having Fun

18. Feel free to make any additional comments.
