

NORTHWEST SOCCER CLUB  
**INTENTION TO COACH NEXT SEASON**

Name \_\_\_\_\_

Current Season and Team Number(s) \_\_\_\_\_

Mark for **all** the teams you propose to coach or assistant coach for next season:

**I plan to be a head coach for (mark age and gender class):**

- |                              |                                |                                |
|------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 6U  | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 8U  | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 10U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 12U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 16U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> U16 | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 19U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |

**I plan to be an assistant coach for (mark age and gender class):**

- |                              |                                |                                |
|------------------------------|--------------------------------|--------------------------------|
| <input type="checkbox"/> 6U  | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 8U  | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 10U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 12U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 14U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 16U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |
| <input type="checkbox"/> 19U | <input type="checkbox"/> Co-ed | <input type="checkbox"/> Girls |

**I am not planning on coaching next season.**

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

*Please complete, sign, and drop-off or send a scanned PDF by email to the registrar by **JUNE 15** (after spring season) or **NOVEMBER 15** (after fall season).*

Judy Neal, 4018 39th Place, Des Moines IA 50310 • registrar@nwsoccerclub.org