

**ARCHDIOCESE OF ST. LOUIS
CATHOLIC YOUTH COUNCIL-SPORTS
COACH AUTHORIZATION FORM**

PARISH/SCHOOL:

SPORT:

(Indicate Yes or No)

(The date of completion needs to be indicated here.)

	GENDER	GRADE	Coach's Name	Head	Assistant	Coaches	Protecting	Code of	Background
	(M/F)			Coach	Coach	ID #	God's Children	Ethical Conduct	Check
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									
18									

I authorize the submission of the rosters for the teams listed above to the CYC-Sports.

Signature of Pastor/Principal /Child Safety Coordinator or Authorized Representative:

(Title)

(Signature)

(Date)

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Athletic Association must have their roster (s) and their COACH AUTHORIZATION FORM (s) completed and submitted to their rectory/school office two weeks prior to the date that the rosters are due for turn-in to their district. List all coaches on the roster for each team.

A District cannot accept rosters or place a team into their leagues without the COACH AUTHORIZATION FORM (s) being filled out completely, properly signed and submitted with the rosters.