Welcome to USAG Humphreys







Thank you for your interest in coaching with Youth Sports!

Volunteer Name:	
Emergency Contact: Nam	ne
Cell #	
Relationship	
	Preferable Practice days : MW or TTh
If you have coached before w	hat is the approximate month & year of your last background check
Month Install	ation:
First Aid+CPR & AED Certified	: Yes or No
T-shirt size (American) S	M L XL XXL XXXL Other:
Paperwork Checklist: (Fill out	all the highlighted areas to complete your coach's application)
\Box Documentation of immuniza	tions for: annual influenza, TDaP, MMR and Varicella (Chickenpox) & Covid-19.
Report of birth abroad of a cicitizenship, I321 Permit to re	enship/legal status port (current or expired), DS1350/FS545 Certificate of report of birth abroad,FS240 itizen of the US, N550/5511/570 naturalization certificate, N560/561 certificate of US eenter the US, I551 permanent resident or permanent alien card, I571refugee travel t authorization card, I94 Arrival/departure record &visa
\Box Coach Application	
DD Form 2793 (All highlighte	d areas)
□ IMCOM Release/Consent Statement	
□ DA Form 5018 (Complete see	ction A, Sign and Date Section B)
	On some have a second at a data sharehint alarah anali ta
□ DD Form 2981	Once you have completed the checklist please email to
□ DD Form 2981	YSF Admin Annette Cruz annettesue.m.cruz.naf@army.mil

Youth Sports Office:757-2244 or 0503-357-2244 Mon, Tues, Wed, Fri 0800-1700 & Thur 1200-1700