

# Welcome to USAG Humphreys



Thank you for your interest in coaching with Youth Sports!

Volunteer Name: \_\_\_\_\_

Emergency Contact: Name \_\_\_\_\_

Cell # \_\_\_\_\_

Relationship \_\_\_\_\_

Preferable Practice days : MW or TTh

If you have coached before what is the approximate month & year of your last background check

Month \_\_\_\_\_ Installation: \_\_\_\_\_

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)

- ☐ Coach Application
- ☐ DD Form 2793 (All highlighted areas)
- ☐ IMCOM  
Release/Consent Statement
- ☐ DA Form 5018 (Complete section A, Sign and Date Section B)
- ☐ DD Form 2981

Once you have completed the checklist please email to

YSF Sports Specialist, Imara Anderson at

[imara.z.anderson.naf@mail.mil](mailto:imara.z.anderson.naf@mail.mil)

or return to parent Central office, Bldg. 6400, second floor

Youth Sports Office: 757-2244/2247 or 0503-357-2244/2247

Mon, Wed, Fri 0800-1700, Tues 0800-1900, Thur 1200-1700