

National YMCA Altitude Training Camp
Olympic Training Center – Colorado Springs, Colorado
August 20-25, 2006
COACHES APPLICATION

Name_____ Date of Birth_____
Address_____
City, State, Zip_____ # of trips to OTC_____
Phone # (work)_____ (home)_____
YMCA Team_____

By my signature I agree to the following:

1. If selected I will accept a coaching position on the YMCA Altitude Training Team.
2. Cancellation on my part prior to one month before the camp may result in a charge of up to \$100.
3. I agree to sign and follow a United States Olympic Committee Code of Ethics. I will also follow the ethics set forth by The YMCA of the USA.
4. I will report to the camp with the understanding that I will coach all the athletes to the best of my ability. I will complete all paperwork designated by the camp director's, in a timely manner. I will become familiar with all of the athletes in the camp as well as their coach's recommendation's.
5. I understand that the YMCA Coaches Association will pay for my costs on this trip to include ground transportation and airfare. I will turn in all receipts to the camp director in a timely manner and keep my expenses to a minimum.

Applicant's signature_____ Date_____
Team Placing at 2006 Nationals_____

References

Each applicant must provide the names of three YMCA Coaches' who would be willing to recommend you to the camp director.

1. Coach_____ YMCA_____ Phone_____
2. Coach_____ YMCA_____ Phone_____
3. Coach_____ YMCA_____ Phone_____

Please return this form to the Announcers Table at Nationals or mail directly to:

Bill Sepich – OTC Camp Director
Burlington Co. YMCA
59 Centerton Rd.
Mt. Laurel, NJ 08054
856-234-6200 Ext. 207
bills@ymca-bc.org

APPLICATIONS DUE BY JUNE 1, 2006
SELECTIONS WILL BE MADE BY JUNE 8, 2006

