



# ***Coach Contact Information And Parental Understanding***

## **A. Coach Contact Information for:**

\_\_\_\_\_  
(print name)

1. Best email contact \_\_\_\_\_
2. Best phone number for calls or text messages \_\_\_\_\_
3. Best emergency contact name \_\_\_\_\_
4. Emergency contact's best phone number \_\_\_\_\_
5. NCCP # (if applicable) \_\_\_\_\_
6. Medical condition staffing team needs to be aware of: \_\_\_\_\_

## **B. Parental Understanding (coaches under 19 years of age)**

I, \_\_\_\_\_, parent of the above signee, understand and  
(print name)  
support my athlete's commitment to the PGTF Club as a coach.

\_\_\_\_\_  
(Parent Signature)

\_\_\_\_\_  
(Date)

**FOR MORE INFORMATION CONTACT:**  
Coaching Committee  
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