

# TOWNSHIP OF PEMBERTON

## Department of Recreation

**Mayor**  
David Patriarca

**Business  
Administrator**  
Dennis Gonzalez

**Director**  
Joe Marrolli

500 Pemberton-Browns Mills Road  
Pemberton NJ 08068-1539  
(609) 893-5034 – Telephone

[recreation@pemberton-twp.com](mailto:recreation@pemberton-twp.com) – E-mail

[www.pemberton-twp.com](http://www.pemberton-twp.com) – Website

**Township Council**  
Jason Allen  
Elisabeth McCartney  
Donovan Gardner  
Letha Jackson  
Norma Trueblood

### YOUTH BASKETBALL - POSITION APPLICATION

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Position Applying For:  Clock Person  Bookkeeper  Coach  Asst Coach

T-Shirt Size: \_\_\_\_\_

**CLOCK PERSON & BOOKKEEPER APPLICANTS:**

Briefly describe why you would like to be considered for the position - please include any experience you have with basketball: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Are there any dates during the season that you will not be available? \_\_\_\_\_

\_\_\_\_\_

**COACH & ASSISTANT COACH APPLICANTS:**

Have you volunteered as a youth sports coach before? YES NO

If yes, which sports have you coached? \_\_\_\_\_

How many years of coaching experience do you have? \_\_\_\_\_

Have you worked with youth in programs other than sports? YES NO

If yes, please list: \_\_\_\_\_

Have you completed the Rutgers Safety Training Program? YES NO

(CONTINUED ON NEXT PAGE)

Do you have any other youth-volunteer related training? YES NO  
If yes, please list: \_\_\_\_\_

Are you certified in First Aid and/or CPR? YES NO

Will your child be on your team? YES NO

If yes, child's name: \_\_\_\_\_ Division: \_\_\_\_\_

If no, please select which division you would like to coach:

PeeWee (Co-Ed; Grades K & 1st)

Rookies (Co-Ed; Grades 2nd & 3rd)

Minors (Boys; Grades 4th & 5th)

Minors (Girls; Grades 4th, 5th & 6th)

Juniors (Boys; Grades 6th & 7th)

Majors (Boys; Grades 8th & 9th)

Majors (Girls; Grades 7th, 8th & 9th)

Coaches - Do you have an assistant coach in mind? YES NO

If yes, their name: \_\_\_\_\_

Will their child also be on the team? YES NO

If yes, child's name: \_\_\_\_\_

**PLEASE NOTE - ALL APPLICANTS AGE 18+ MUST SUBMIT AN ONLINE VOLUNTEER  
BACKGROUND CHECK: [http://www.pemberton-twp.com/crbst\\_123.html](http://www.pemberton-twp.com/crbst_123.html)**

**SUBMIT YOUR APPLICATION BY:**

**EMAIL: [recreation@pemberton-twp.com](mailto:recreation@pemberton-twp.com)**

**MAIL:**

**Township of Pemberton  
ATTN: Recreation Department  
500 Pemberton-Browns Mills Road, Pemberton, NJ 08068**

**IN-PERSON:**

**Pemberton Township Department of Recreation & Senior Services  
69 Tensaw Drive  
Browns Mills, NJ 08015**

**After hours Convenience Drop Box available @ the Recreation Department**

***THANK YOU FOR YOUR INTEREST - WE WILL BE IN CONTACT AS THE SEASON APPROACHES!***

**QUESTIONS? CONTACT THE RECREATION DEPARTMENT:  
609-893-5034 / [recreation@pemberton-twp.com](mailto:recreation@pemberton-twp.com)**