

Activities Sponsor Agreement

The undersigned is employed to serve as a Sponsor during the below listed school year, for activities in Jefferson County Public School District, Golden, Colorado.

The Sponsor shall abide by all Rules and Regulations of the Jefferson County Board of Education, the Rules and Regulations of the Colorado High School Activities Association, the Jefferson County Athletic League Board of Control and the laws of the State of Colorado.

Restricted Coaches/Sponsors are covered in the same manner as other District employees in areas of liability.

Guidelines for Restricted Coaches/Sponsors:

- Endorsement by the Activities Director for the school by his/her signature below
- Must complete all paperwork with Human Resources **prior to first practice** – Including Sponsor Testimonial, Fingerprinting, I-9 PERA Form, & Application Oath.
- The Activities Director, with input from the head sponsor will evaluate the Sponsor's effectiveness and if performance is unsatisfactory, the Activities Director will make final decision concerning dismissal if necessary
- CPR/AED/1st Aid Certification and Concussion Certification is required
- **Sponsor will not be required to obtain a CHSAA certificate.** The signatures of the sponsor and Activities Director below indicate that this agreement has been read and understood by all parties.

Sponsor: _____ Date: _____
 Print Name & Sign

Address: _____ City: _____ Zip Code: _____

SS# _____ Phone _____ Work _____

Email address: _____ Date of Birth: _____ Gender: ___ M ___ F

Activity _____ School _____

Season Dates - starts _____ / ends _____ School Year _____

Ethnicity & Race: Please answer both questions below.

<i>Do you consider yourself to be of Hispanic/Latino origin (choose one)?</i>	<i>Which of the following groups describe your race (choose one or more)?</i>
___ No, Not Hispanic/Latino ___ Yes, Hispanic/Latino	___ American Indian or Alaska Native ___ Asian ___ Black or African American ___ Native Hawaiian or Other Pacific Islander ___ White

Athletic/Activity Director's Signature _____ Date _____