

SoloQuest Learning Center

Coach/Trainer Agreement for the Physical Education Program

To: Coach/Trainer of Applicant for SoloQuest Physical Education

From: Deborah Stewart, Director SoloQuest Learning Center

As part of the documentation for SoloQuest Physical Education, we require a signed statement from the out-of-school coach/ trainer verifying the information that is listed on the application. Please complete, sign, and date this form.

It is the student's responsibility to submit this completed form, along with the Physical Education Enrollment Agreement to the SoloQuest office.

Required Verification/Information from Coach/Trainer

I verify that I am coaching/training (student's name) _____ in the activity of _____ and I am 21 years or older. The applicant trains approximately _____ hours per week (a required minimum of five hours per week) under my direct supervision. I accept the responsibility to report the student's progress to the school within the quarterly deadlines. Moreover, I further agree to hold harmless SoloQuest Learning Center, and waive any liability towards the same as a result of my participation as a coach/trainer for the student listed above.

Coach/Trainer's Signature _____ Date _____

Printed Name of Coach/Trainer _____ Telephone _____

Name of Organization _____

Location of Practice _____