COYBSA

COACHES APPLICATION

Name_____ **Date of Birth**_____/_____/_____

Address_____ **City**_____**Zip**_____

Home Phone_____ **Work Phone** _____ **Cell Phone** _____

Drivers License _____ **Social Security** _____ **Email**_____

References

Name_____ **Name**_____

Address _____ **Address**_____

_____ _____

Phone Numbers_____/_____ **Phone Numbers**_____/_____

Qualifications

Have you ever managed or coached before? _____

If yes, where? _____

In what capacity?_____**Number of years**_____

Experience: _____

_____

_____

_____

_____

Baseball

Coach Pitch	Ages 4 & 5	____
Shetland	Age 6 Only	____
Pinto	Ages 7 & 8	____
Mustang	Ages 9 & 10	____
Bronco	Ages 11 & 12	____
Pony	Ages 13 & 14	____

Softball

6 & under	____
8 & under	____
10 & under	____
12 & under	____
14 & under	____

All current COYBSA Board of Director Members, Managers and Coaches will be required to be fingerprinted and/or pass a thorough background check in order to be eligible to be considered for any of the aforementioned positions. Failure to do so will result in removal from any of the positions granted to you.

_____
Initials

I declare that all the information given on this application is true and correct to the best of my knowledge. I also understand that Charter Oak Youth Baseball/Softball Association reserves the right to check any and all of the references given on this application.

_____ _____
Signature **Date**

League use only

Division_____ **Team**_____

Fingerprinted_____ **Background Check**_____

rev 11/10 dc