



Baseball Coach Application

(Please print)

First name: _____ MI _____ Last name: _____

Address: _____ City: _____

Zip: _____ Phone: _____ Alt. _____

Email: _____

Preferred contact method: (circle all that apply) phone text email

Date of Birth: ____/____/____ Social Security Number: ____/____/____

Racial Background: Circle all that apply

Caucasian African American Hispanic Asian Native American Other: _____

Please list dependent children/age:

| | |
|-------|-------|
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |

Shirt Size:(circle one)

A-small A-med A-Lrg A-XL A-XXL A-XXXL _____

Division:

T-Ball Coach Pitch 10u(travel) 10u (softball) 12u(travel) 13u(travel) 14u(Pony)

Experience:

Coaching Preference: (Circle all that apply)

Head Coach Asst. Coach Team Parent No preference

Please note that completing a coaching application does not ensure a coaching position. Positions are available based on number of teams. All coaches and assistant coaches must complete an application.

Carrollton Twp Recreation Department does perform criminal background checks for all coaches via Ichat. By signing this application you are hereby granting permission to the Carrollton Twp Recreation Department to perform this background check.

Coaches Printed Name _____

Coaches Signature: _____ **Date** _____

Office Use Only : Ichat : Received Approved Denied