

Longview Youth Baseball Manager Application

Name: _____ Phone #: _____

Address: _____ Division: _____

Coaching Experience:

1. Years/Level: _____
2. Post Season: _____
3. Skills/Assets: _____

Player Experience:

1. Years/Level _____

Other Experience With Kids: (Education, Training, Other Sports, Youth Group, Ect.)

1. Years/Level: _____

2. Skills/Assets: _____

Training/Clinics:

1. _____

League Involvement:

1. Years/Level: _____

Children in League:

1. Age/Level: _____

Commitment:

1. Would Anything Keep You From Filling Commitment To Team:

2. I Understand That My Team Is Responsible For **Helping** Keep Equipment Safe, Field Clean and Mowed, And At Least Two/Three Park Ranger Sessions **Initial:** _____

3. Coaching Goals: _____

Signature: _____ Date: _____

Office Use: Certification Date: _____ Background Date: _____

Turned In To Jake Knudsen @ longviewbaseball247@gmail.com by Feb. 9th 2019