

2016 Coach Application



Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Family Information

Child's Name:	
Please select the Age group you wish to Coach:	
If you have a child wishing to join the program, have you coached them before?	

Past Athletic Experience

What is the highest level you played in any sport?	
Sports Played:	
Name of School or Team	
What is the highest level of competitive sports you played in baseball/softball?	
Name of School, Team, or Town?	

Please provide a summary of your Baseball/Softball Playing:

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Past Coaching Experience

Highest Level of Coaching you have done?	
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Sports Coached:	
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Please provide a summary of your coaching Experiences

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Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. All coaches will undergo a background check. If accepted, I agree to participate in coaching clinics provided by Royal Swings. I also agree to abide by and follow the rules identified in the Ravens Handbook

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.