

Vestal Teener Baseball League Managing/Coaching Application Form

Managing/Coaching selections are subject to Vestal Teener Baseball League Board of Directors approval. Applicants may be subject to an in person interview and/or background check. Please email, mail or deliver the application to: Vestal Teener Baseball League at: vestalseniorleague@gmail.com /VTBL PO Box 292 Vestal NY 13851

Positions applying for: Check all that apply. Manager____ Coach____. Which level(s) are you interested in managing/coaching? Check all that apply. 14U____, 16U____, 18U____.

Name (Last, First, MI): _____

Date of Birth: _____ Email Address: _____

Cell Phone: _____ Current Address: _____

Home Phone: _____ What is your previous Managing/Coaching Experience?

Do you have training in any of the following? Medical: ____ CPR: ____ First Aid: ____

Why do you want to Manage/coach at Vestal Teener Baseball League (Max. 1000 characters)

What is your coaching philosophy (i.e. Play time, player discipline, number of practices, etc)? (Max. 1000 characters)

Have you ever been convicted of, or pled guilty to a crime? ____ . Have you ever been held liable for civil penalties or damages involving sexual or physical abuse? ____ . Have you ever been subject to any court order involving any sexual or physical abuse of a minor, including but not limited to a domestic order of protection? ____ . Have any complaints ever been made against you either at work or in your capacity as a volunteer that you verbally, emotionally, sexually or physically abused a minor? ____ . Do you have a history of any behavior that might make you a danger to any children, youth or adolescents in this program? ____ . Have you ever been denied a volunteer managing/coaching position in the past? ____ . If you answered yes to any of the previous questions, please provide date(s) and circumstances on a separate sheet.

Do you have any additional information you would like to provide? (Max. 1000 characters)

Provide three (3) references.

1. (Name) _____ (Phone) _____
(Email) _____ (Years Known) _____

2. (Name) _____ (Phone) _____
(Email) _____ (Years Known) _____

3. (Name) _____ (Phone) _____
(Email) _____ (Years Known) _____

APPLICANT'S STATEMENT, AUTHORIZATION AND RELEASE OF LIABILITY, I certify that all information given by me in this application is true and correct to the best of my knowledge. I understand that false or misleading statements made by me or consequential omissions of any kind in the application process, are sufficient cause for my not being accepted as a volunteer or for my dismissal no matter when discovered. I authorize Vestal Teener Baseball League to investigate all information contained in this application. The employers, organizations and individuals named are authorized to give you any and all information regarding my employment, volunteer work, character, fitness and qualifications (including opinions) that they may have about me. In consideration of the evaluation of this application by Vestal Teener Baseball League, I HEREBY WAIVE, RELEASE AND DISCHARGE Vestal Teener Baseball League, all employers, organizations, and individuals and any other persons or entities from liability for all damages and losses of whatever kind or nature, except liability for willful or intentional acts or punitive damages, that may result from compliance or attempts to comply with this authorization. The submission of a manager/coach's application does not guarantee a managing/coaching position for the season. The number of managers/coaches required, experience and references will all be considered when appointing managers/coaches. The Vestal Teener Baseball League reserves the right to place coaches in positions where they are most critically needed.

Signature: _____ Date: _____