



Silverado Little League
Silverado West Little League



APPLICATION FOR MEMBERSHIP TO BOARD OF DIRECTORS

NAME: _____

ADDRESS: _____

City: _____ State: _____ Zip Code: _____

BEST CONTACT PHONE: (____) _____ Cell Home

Email Address: _____

1. Division in which your child is currently playing _____

2. Reason you would like to serve _____

3. Current/Prior organization memberships _____

4. Do you wish to manage or coach a team for this Season? _____

IMPORTANT:

Please keep in mind that your request is also a commitment. Board meetings are held at least once a month throughout the entire year. Participation is mandatory! You must hold a position on the board to join. Because the number of managers and coaches on the board must be a minority, we are always in need of regular members.

Please return this application to the league by mail, submit to any concession stand prior to the end of the regular season or you can email it to information@silveradoll.org

Also feel free to check website for the next Open Board Meeting.