APPLICATION FOR COMPETITIVE BASEBALL COACH

name:					
Address:					
Phone:					
Email:					
DESIRED AGE TO COACH: 7U 8U 9U 10U					
TYPE OF TEAM: SELECT/REC	TRA	TRAVEL			
OBJECTIVES and GOALS:					
CLINICS, CAMPS & CLASSES ATTENDED:					
CLINICS, CAMPS & CLASSES ATTENDED.					
COACHING EXPERIENCE:					
PERSONAL REFERENCES:					
have read and understand the NYSA Competitive Baseba and understand that if selected as a Head Coach/Manager agree to adhere all regulations set forth by the Navarre You	, I must a	adhere	to all po		
Signature of Application	•	<u> </u>	ate		
Received By		Γ)ate		