



Manager Application Spring 2010

Date: _____

Name: _____

Division: _____

Years Service to
League: _____

League function to participate in 2010: Must choose at least one, if left blank you will be assigned.	_____	field days	_____	golf tournament	_____	stand
	_____	oyster festival	_____	picnic	_____	brick sales
	_____	sorting equipment	_____	raffle collection	_____	sponsors

Experience as Manager and or Coach in youth Baseball: _____

Past participation with League Functions: _____
ie.... Equipment, picnic, field day, etc.... _____

Experience as Manager and or Coach with other sports or activities: _____

References with contact #'s: _____

Are you CPR Certified? NO YES expiration date _____

Are you AED Certified? NO YES expiration date _____

Home Phone: _____

Mobile Phone: _____

*E-mail Name: _____

Signature: _____

*** Please print very clearly**