BELMONT HEIGHTS LITTLE LEAGUE INC.

P.O. Box 310403
Tampa, Florida 33680-0403
Phone: 813-391-1497
E-Mail: info@BelmontHeightsLL.com
www.BelmontHeightsLL.com

What position are you applying for:

Manager   Asst. Coach   Team Parent

Division of Play:

Tee-ball   Coach Pitch   Minor League

Major League   Junior League   Senior League

Do/Will you have a child on this team:

Yes   or   No

APPLICATION INFORMATION: (PLEASE PRINT CLEARLY)

LAST NAME_____ FRIST NAME_____ MI _____ DOB ____/____/____

STREET ADDRESS_____ CITY_____ STATE_____ ZIP_____

HOME NUMBER (   ) _____ CELL NUMBER (   )_____ EMAIL_____

OCCUPATION_____ EMPLOYER_____ WORK NUMBER (   ) _____

COACHING EXPERIENCE:

YEARS EXPERIENCE COACHING BASEBALL OR ANY OTHER SPORT_____

WHERE DID YOU COACH: WHAT ORAGANIZATION: _____WHERE:_____

COACHING REFERENCE: INDIVIDUAL'S NAME: _____CONTACT NUMBER:_____

OTHER REFERENCE 1: INDIVIDUAL'S NAME: _____CONTACT NUMBER: _____

OTHER REFERENCE 2: INDIVIDUAL'S NAME: _____CONTACT NUMBER: _____

MEDICAL CONDITIONS:

_____

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PERSONAL BIO:
(Provide no less than two sentences about yourself and why you want to coach youth baseball. Use additional paper if needed)

_____
_____
_____
_____
_____
_____
_____
_____

BACKGROUND INFO:
(Working with youth is a privilege and we want to ensure the safety of all our participates – although the following may not be held against you – it helps us to determine if you are fit to work with our youth)

HAVE YOU EVER BEEN CONVICTED OF A FELONY? IF YES EXPLAIN_____

WOULD YOU OBJECT A BACKGROUND CHECK? _____

To the best of my knowledge, all information given on this form is factual. I understand that the Conference will take Disciplinary action against the individual, team and Association that presents falsified information on documents. I've also read the code of conduct and will follow it to the best of my ability and understand by not doing so I could forfeit my coaching assignment if I violate any of the rules.

SIGNATURE_____**DATE**_____

DO NOT WRITE BELOW THIS LINE

APPROVED: **YES**   **NO**

POSITION APPROVED:_____

DIRECTOR: _____**DATE:** _____

VICE-PRESIDENT: _____**DATE:** _____

PRESIDENT: _____**DATE:** _____