

Montgomery Girls Sports Association

Managers/Coaches Application

***COPY OF DRIVERS LICENSE MUST BE TURNED IN WITH THIS FILLED OUT.

Name: _____

Phone Number: _____ Cell Number: _____

Email Address: _____

Address: _____

Date of Birth: _____ Social Security # _____

____ Married ____ Single ____ Divorced ____ Widowed

Shirt size: _____ Occupation: _____

Division in which you desire to coach?

6u ____ 8u ____ 10u ____ 12u ____ 14u ____

Please list three personal references:

Name	Address	Phone
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever been convicted of a felony? Y N

Have you ever managed or coached girl's softball? Y N

Please state your past experience in youth sports or girl's softball and share with us why you would like to manage or coach. Please use the back of this paper if necessary.

Managers and Coaches will exemplify the highest standard of sportsmanship at all times!!

Any Manager or Coach who has consumed any ALCOHOLIC BEVERAGES or CONTROLLED SUBSTANCE before or during any game or practice will immediately be suspended, pending review of his/her conduct by the board.

No Manager or Coach shall use obscene language or curse at ANY game or practice.

By signing this application I understand that I am consenting to a background check and will adhere to all the rules and regulations as set forth by the Montgomery Girls Sports Association.

Applicant's signature

MGSA Board Use Only

Manager/Coach approved:

_____ Date _____

BOARD PRESIDENT'S SIGNATURE