

Coach Application

Arvada Junior Baseball

Name		Hm Phone:		
#/Street		Do you have Quest Voice Messaging on your home phone? Yes/No		
City/State/Zip		Wk Phone:		
Social Security #		e-mail:		
Have you ever been convicted of a felony? YES / NO				
Have you ever been convicted for sexual misconduct or other sexually related crime? YES / NO				
Position desired:				
<input type="checkbox"/> Coach		<input type="checkbox"/> Asst. Coach		
APPROVAL OF HEAD COACH (Print and Sign)				
Age Group Desired:				
<input type="checkbox"/> 4 - Mini Tee Ball	<input type="checkbox"/> 7/8 - Regular Baseball	<input type="checkbox"/> 12 - Regular Baseball		
<input type="checkbox"/> 5 - Tee Ball	<input type="checkbox"/> 9 - Regular Baseball	<input type="checkbox"/> 13 - Regular Baseball		
<input type="checkbox"/> 6 - Coach Pitch	<input type="checkbox"/> 10 - Regular Baseball	<input type="checkbox"/> 14 - Regular Baseball		
<input type="checkbox"/> 7/8 - Machine Pitch	<input type="checkbox"/> 11 - Regular Baseball			
Level of Competition (Applies to teams 8 - 14 years of age Regular Baseball Only)				
<input type="checkbox"/> Majors	<input type="checkbox"/> Minor AAA	<input type="checkbox"/> Minor AA		
Do you currently have a child/children enrolled in this program? Yes / No				
Please list all age/ages		_____		

Previous Coaching Experience:				
Position	Organization	Address / Phone	Dates of Service	Reason fo leaving

Signature: