



# Team Staff Application

## Contact Information

Name  
 Street Address  
 City, Prov, Postal Code Home  
 Phone  
 Cell Phone  
 E-Mail Address  
 Date of Birth

Head Coach

Assistant Coach

Team Manager

Other: \_\_\_\_\_

What Age Division(s) are you applying for :

\_\_\_\_\_

Please provide your NCCP # (if you have one):

### If Applying to Coach, Please Indicate any Coaching Certificates you have :

- |  |   |
|--|---|
| <input type="checkbox"/> Community Coaching - Softball | <input type="checkbox"/> MED - Making Ethical Decisiions    |
| <input type="checkbox"/> Respect in Sports             | <input type="checkbox"/> Foundations of Coaching Softball 1 |
| <input type="checkbox"/> Competition intro             | <input type="checkbox"/> Foundations of Coaching Softball 2 |
| <input type="checkbox"/> Competition development       |   |

List Any other Coaching certificates or Course not listed above:

### Please list any previous coaching or managing experience with Baseball or Softball or any other sport

Year	Age Group/Division	Position, Head Or Assistant Coach	Organization



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## Personal References

<u>Name</u>	<u>Relationship</u>	<u>Phone Number</u>

**Briefly describe why you would like to Coach/Manage this team**

**Briefly Describe what your goal for the season would be**

## Other information

Have you ever been denied a coaching position that you have applied for? \_\_\_\_\_ YES \_\_\_\_\_ NO

Please Explain:

Do you have a child playing at the coaching level you have applied for? \_\_\_\_\_ YES \_\_\_\_\_ NO.

Name of your Child/children:



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### Person to Notify in Case of Emergency

Name	
Street Address	
City Prov, Postal Code	
Home Phone	
Cell Phone	
E-Mail Address	

### Agreement and Signature

I, \_\_\_\_\_ am aware that the first goal of Blitz Fastball is the personal skills and Character development of each player. As a Coach/Manager, I will be committed to the growth and development of the team, providing each player in my charge with a fair opportunity and consideration in situations and context. I am aware of and agree that any behavior on my part that would be contrary to the above goals could cause the forfeit of my coaching/ managing privileges. I will endeavor to Show respect for my players, the association, all opposing players, coaches, managers and officials. I acknowledge that I may face disciplinary action from the BBFA if I fail to maintain the level of conduct and sportsmanship required by this association.

Applicant Name (printed)	
Applicant Signature	
Date	

**\*\*Please be advised that Beaumont Blitz Fastball Association (BBFA) requires team staff provide a Criminal Record Check - Vulnerable Sector Check prior to being registered to a team.**