

Harwinton Little League P. O. Box 124 Harwinton, CT
2008 Manager/Coach Application

Name: _____

Home Phone _____

Address: _____

E-Mail _____

Check division of Coaching:

Majors/Manager ___ Majors/Assist ___ AAA /Manager ___ AAA/Assist ___ AA /Manager ___

AA / Assist ___ A ___ Rookie ___

Reason for wanting to be a Coach for Harwinton Little League (use back if needed):

Baseball Coaching Experience: (use back if needed):

Other Coaching Experience/Leader Experience: (use back if needed)

I understand that this application does not automatically entitle me to manage or coach. I understand that the organization is operated by volunteers and that by submitting this application I am volunteering my time to help operate the league under the oversight of the Board of Directors and HYSA. I understand that if I am selected there may be other duties required of me in addition to those associated with coaching and managing. These duties include but are not limited to field maintenance and upkeep, field preparation and restoration, trash disposal umpiring duties and mandatory coaching/umpiring clinics or training sessions. I understand and grant permission to HYSA Inc to conduct a criminal background check or a check of sexual offender registry as required by Little League Child Protection Program. I understand and take responsibility for returning all equipment issued to me. I also understand that working with Little League boys and girls is a privilege and not a right and that I can be removed from my position at any time by the Board of Directors of HYSA.

Applicants Signature _____

Date: _____