



Application to Manage or Coach

Knik Little League, Inc
PO Box 771384, Eagle River, AK 99577-1384

Recommendations

- Prog. Vice President
- Appointment OK
- Confirmed/Board
- Other

<p>PLEASE PRINT ALL ENTRIES except for certification signature</p>	<input type="checkbox"/> I want to Manage (Head Coach) <input type="checkbox"/> I want to Coach (Assistant)		
Personal Data	Questions		
Name _____	Have you coached or managed previously (yes/no)		
Street _____ _____	If YES, Where, what year (s)		
Mail address (if different) _____	Have you been arrested for anything other than minor traffic charges? (yes/no)		
City, State and Zip _____	If YES, please give details, dates(s), conviction(s)		
Home phone _____	Give two references who can vouch for your character and integrity (no relatives): Please give name, address and phone:		
Work phone _____	1. _____		
Soc. Sec. # _____	2. _____		
Driver License #/State _____	I want to manage/coach (select one) <input type="checkbox"/> Tee ball <input type="checkbox"/> Coach Pitch <input type="checkbox"/> Minors <input type="checkbox"/> Majors <input type="checkbox"/> Juniors <input type="checkbox"/> Seniors <input type="checkbox"/> Big League		
Email address _____			
Applying for: Check one:	<input type="checkbox"/> Baseball	<input type="checkbox"/> Softball	<input type="checkbox"/> Tee-Ball
			<input type="checkbox"/> Coach Pitch

AGREEMENT

I understand and agree that should my application be accepted, and I am appointed as a Coach or Manager in Knik Little League, I will abide with all rules and policies of Little League Baseball, Inc., those of Knik Little League, and the rulings of its officers and board of directors. This includes the constitution, by-laws and all local and district rules and policies.

I also understand and agree that a limited records check through appropriate law enforcement agencies may be conducted on me to determine if any criminal convictions involving child abuse and/or child molestation have been proven against me. The purpose of such a check is to assist in providing for the health, welfare, and moral well-being of the youth under my care as a manager or coach.

I also understand that, should I be found in violation of any rule or policy or application statement, I am subject to immediate suspension and/or dismissal from Little League.

League-owned Equipment and Uniforms:

By signing this application, I agree that all equipment and uniforms will be turned in to Knik Little League within ten (10) days following the end of the playing season. I hereby agree to pay for all missing items, fair wear and tear accepted.

I hereby affirm that the information contained in this application to Coach or Manage a baseball or softball team in Knik Little League is true and correct to the best of my knowledge. I hereby hold Knik Little League, Inc., its officers and agents, harmless from any liability and further understand that a decision to accept or decline this application is solely within the authority of the President and Board of Directors of Knik Little League, Inc. All Coach and Manager appointments expire on September 15th of the same playing year as appointed in accordance with national Little League regulation.

Signed: _____

Date: _____