FLUVANNA YOUTH



Manager/Coach Application

Name:															
Phone:	(H)				(C)				(V	W)					
Date of Birth:						SSN:					•				
Address:															
Email Addres	ss:														
Application for: (Circle One)				Manager				Coach							
Division: (Circle One)			T-Ball	Roo	okie	Minors N				ajors			Jr. Babe		
Requested Team Name:								S	M	L	XL	2XL	32	XL	
Occupation:															
Previous Coaching Experience:															
Do you hold	,	Υ	N www.t				ers must be Certified! paberuthcoaching.org s are encouraged to be!								
Have you ever	n any you	outh sports program?				Υ		N							
 I accept the following conditions: I accept responsibility for my team's activities on the field. I agree to study the rules of the game and be familiar with the rules of Cal Ripken/Babe Ruth Baseball and any rules outlined by Fluvanna Youth Baseball(FYB). I agree to follow these rules and teach my players to do the same. I will encourage my players to respect each other, the game, the opposing players, coaches and umpires. I understand it is my duty to encourage my player and their families to support the continued existence of Fluvanna Youth Baseball(FYB) by providing concession stand coverage and conducting essential fund-raising activities and field I acknowledge that I lead by enthusiastic example and will make diligent efforts to attend all team practices and games, and Fluvanna Youth Baseball(FYB) sponsored events such as picture day and opening/closing ceremonies. 															
As a condition of volunteering, I give permission for Fluvanna Youth Baseball(FYB) to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history record. I understand that, if appointed, my position is conditional upon the League receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability, Fluvanna Youth Baseball(FYB), the officers and volunteers thereof, or any other person or organization that may provide such information. I also understand that regardless of previous appointments, Fluvanna Youth Baseball(FYB) is not obligated to appoint me to a Manager/Coach position. If appointed, I understand that prior to the expiration of my term, I am subject to suspension or removal by the Board for violation of policies or procedures of Fluvanna Youth Baseball(FYB).															
Applicant Signature:							Date:								