

**HOME PLATE  
TEAM MANAGER/HEAD COACH'S APPLICATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone \_\_\_\_\_ W \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail \_\_\_\_\_

Age group that you would to manage/coach \_\_\_\_\_

Assistant Coaches: Names/phone

\_\_\_\_\_

Will you be practicing at "The Chuck"? \_\_\_\_\_

Will your team being playing entirely tournaments? \_\_\_\_\_

Background in Coaching Youth Sports:

(Mgr. or asst. coach) Date(s) League(s) Age(s)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Your playing experience:

\_\_\_\_\_

\_\_\_\_\_

References:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

By accepting the position of Manager or coach of a team at Home Plate, I agree to follow all rules and regulations set forth by Home Plate. I agree to conduct myself in a sportsmanlike manner at all times and to the best of my ability teach my players the same. I agree to complete and abide by the requirements listed in the Home Plate Player/Parent/Manager agreement. As manager, I take responsibility to the teams budget and collecting all monies due to Home Plate from the team's parents/players..

By signing this application, I hereby verify that the information provided is true and correct.

\_\_\_\_\_ Date \_\_\_\_\_

Signed

\_\_\_\_\_

Printed Name

Return this form along with the Background Check Consent form to Home Plate 611 Highway 74S, Ste 800, Peachtree City, GA 30269.