



FILL IN THE FORM, SAVE IT TO YOUR COMPUTER, AND E-MAIL TO:
PLAYERAGENT@NAVAJOSOFTBALL.COM

MANAGER AND COACH APPLICATION

NAVAJO GIRLS FASTPITCH

PO Box 191088, San Diego, 92159

www.navajosoftball.com

MINIS 8U 10U 12U 14U

Please Print:

Name Email
Address City Zip
Employer Occupation
Home Phone Cell Phone

Have you been convicted of a felony? Yes No
If yes, please explain:

Have you registered for any offense under 290 C.P.C. or equivalent penal code? Yes No
If yes, please explain:

Have you been suspended from any youth program? Yes No
If yes, please explain:

Does your daughter play for Navajo Girls Fastpitch? Yes No
If yes, please list name, age, division:

Have you coached girls' SOFTBALL? Yes No
If yes, please describe (years/age/division):

Do you have experience with other youth programs? Yes No
If yes, please describe

Please list two references with knowledge of your experience in a youth program:

Name Phone Number
Name Phone Number

Why do you want to manage a Navajo Girls Fastpitch team this season?

By civil law, it is absolutely forbidden to use profanity, alcohol, tobacco, or illegal drugs or gamble at any time during any ASA activity. I will uphold this law, and encourage all parents, relatives, friends, and spectators to abide by this law. I will comply with all the Administration Rules and Regulations of Navajo Girl's Fastpitch, as well as any directive from the League Board of Directors, or the National ASA office. I realize and understand that I am being allowed the privilege of participating with the girls in the Navajo program until the completion of the current season. I will be the finest example of Leadership, Friendship, Sportsmanship, and Citizenship throughout the Navajo season of activities. If I am removed from a game or League activity for improper conduct, because of my actions, I understand that the Board of Directors has the right to reprimand me, including but not limiting to the withdrawal of my position. Upon demand in writing by the Board of Directors, I may be relieved of my League responsibilities. I will be subject to a criminal background investigation and/or fingerprint verification to determine my suitability for this sensitive community position. I will agree to provide my social security number and driver's license number for this background check. I approve of such action, if deemed necessary as directed by the League Board of Directors or the National Office of ASA (C.P.C. 11105.3 (b) & (d)).

Applicant Signature Date

NFG USE:

Selected to Manage: Yes No Board Approval Date: Date Notified: Division: