

COACH APPLICATION for the LUDLOW BASEBALL ASSOCIATION
ludlowbaseball.org

NAME: _____ DATE: _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

eMAIL ADDRESS: _____ MOBILE PHONE: _____

HOME PHONE: _____

Check appropriate boxes

	<u>Boys Baseball</u>	<u>Girls Softball</u>
	<u>U10</u>	<u>U10</u>
	<u>U12</u>	<u>U12</u>
	<u>U14</u>	<u>U14</u>

List Baseball /Softball Experience Below

1. _____
2. _____
3. _____

List Coaching/Youth Experience Below

1. _____
2. _____
3. _____

COACHING CERTIFICATIONS: NYSCA MIAA other(list below)

By signing below, I understand that a CORI background check will done. If accepted as a coach, I agree to become a member of the LBA and uphold the LBA Code of Ethics and Conduct. I will be a leader and role model to my players, fellow coaches and parents.