

# Chatham Minor Baseball Association

## Travel Team Coach Application

Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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<u>Team Request</u> (Circle one)	Rookie	Minor Mosq Bantam	Major Mosq Midget	Minor Peewee Junior	Major Peewee
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National Coaching Certificate      No                  Yes                  Certificate # \_\_\_\_\_

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Coaching Experience                  Yes                  No                  # of Years      \_\_\_\_\_

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References (Name, Phone #, capacity)

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

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### Questions

Will you have a child playing on this team?      YES                  NO

If YES, please write the name of your child: \_\_\_\_\_

Do you have a team manager in mind?      YES                  NO

If YES, please write your manager's name: \_\_\_\_\_

Goals and Objectives for Upcoming Season (ie. # of games, leagues, tournaments)

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In the space below, state what characteristics you would be looking for in an assistant coach?

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In the space below, state how you plan on evaluating and rating players that wish to tryout?

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List what you consider to be the highlights of your coaching career in baseball?

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Why do you want to coach this team?

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Completed applications can be dropped off to:

Chatham Minor Baseball Association  
C/O - Chuck Rylett, Travel Team Convenor  
30 Tweedsmuir Avenue West  
Chatham, Ontario  
N7M 2A4

For more information, contact Chuck at either:

Phone: (519) 437-2014

Email: chuck\_hr@hotmail.com