



softball

Coaching Application

Coaches are approved by the CLNYAA Board and the right is reserved to select coaches based on softball knowledge, ability to work with parents and youth and past demonstrated behaviors at CLNYAA activities.

Name _____ Phone _____

Address _____

Email _____

Drivers License # _____ Soc. Sec. Number _____

Do you have any prior criminal record of any sort? Yes / No (circle one)

If Yes, please explain: _____

I would be interested in Head Coach or Assistant Coach

I would be interested in the following ages:

- 8 & Under - Coach Pitch
- 10 & Under - Fast Pitch
- 10 & Under - Modified
- 12 & Under - Fast Pitch
- 15 & Under - Fast Pitch
- 11-13 - Slow Pitch
- 14-16 - Slow Pitch

I hereby grant Cornelius-Lake Norman Youth Athletic Association permission to perform a background check. I hereby certify that all the above provided information is correct.

Name _____

Signature _____

Date _____