

# Carmel Community Girls Softball Coach Application

Carmel Community Girls Softball (CCGS) strives to take every precaution in protecting the safety of our players. CCGS requires all adults who have supervisory responsibility over minors in our league to complete and sign this application prior to consideration for a manager or coach position. Information provided through this form is for the sole purpose of selecting adult supervisors for our youth softball league. The privacy of this information will be strictly maintained and will not be shared, distributed, sold or in any other way released to any third parties.

Position Sought:  Manager  Assistant Coach

Division:  Pre-rookie (6-8)  Rookie (9-10)  Minor (11-12)  Major (13-14)

Season: 20\_\_

## Applicant Information

Gender:  Male  Female

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

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

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Mobile/Emergency: (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

Name(s) of player(s) for whom you are parent/guardian: \_\_\_\_\_

(Circle one)

YES NO Have you previously held a Manager / Coach position with CCGS? If YES, please give details:  
\_\_\_\_\_

YES NO Have you previously held a Manager / Coach position with any other youth recreation organization? If YES, please give details:  
\_\_\_\_\_

YES NO Have you ever been suspended from any youth program? If YES, please give details:  
\_\_\_\_\_

YES NO Have you ever been registered for any offense under 290 C.P.C. (Sex Crimes) in California, or under any equivalent penal code in another state?

YES NO Have you ever been convicted of any "drug crimes"? (Either misdemeanor or felony)

YES NO Have you ever been convicted of any "crimes of violence"? (Either misdemeanor or felony)

## PLEASE READ CAREFULLY AND INITIAL THE FOLLOWING STATEMENTS:

\_\_\_\_\_ I hereby irrevocably consent to and authorize the reproduction of any and all photographs taken of me by any photo medium, including videotape, for normal program purposes for the current year and in association with CCGS.

\_\_\_\_\_ I will comply with the current year CCGS rules, ASA Official Rules of Softball and the ASA Code of Conduct.

\_\_\_\_\_ I understand that the position for which I am applying is for the duration of the current season unless **revoked sooner** by the CCGS Board of Directors. I understand that I may be subject to a background investigation and/or fingerprint verification to determine my suitability for this sensitive community position. I hereby approve such action if deemed necessary. (C.P.C. #11105-2, or equivalent penal code in your state.)

\_\_\_\_\_ I understand that the CCGS Board of Directors has sole authority to grant the privilege of on-field participation as Manager or Coach. The Board retains the right to, at any time, rescind this privilege for cause.

\_\_\_\_\_ I understand that use of alcohol, non-prescription drugs, profanity, physical or verbal abuse, negligence or other negative behavior that in any way directly or indirectly impacts any players in our league or the general reputation and good standing of our league will result in immediate revocation of on-field privileges and position.

\_\_\_\_\_ I understand that tobacco products will not be used during any league events.

**By signing this form, the applicant certifies that all information provided is correct and true.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## ~~~~~ CCGS BOARD OF DIRECTORS USE ONLY ~~~~~

This application was reviewed by the CCGS Board of Directors at a meeting held on \_\_\_\_\_ (date).

**ACTION TAKEN:** Rejected \_\_\_ Accepted \_\_\_ Returned \_\_\_ Filed \_\_\_ Reason: \_\_\_\_\_

President's Signature: \_\_\_\_\_ Division Rep: \_\_\_\_\_