

San Jose Pacific Pony Baseball

Application for Team Manager or Coach

Position: _____ Manager _____ Coach

Name: _____
Last First MI

Address: _____

City Zip

Date of Birth: _____ SSN: _____ - _____ - _____ CDL: _____

Employer: _____ Bus Phone: _____

Select the division in which you are requesting to manage or coach

T-ball (5-6 yrs): _____ Pinto (7-8 yrs): _____ Mustang (9-10 yrs): _____
Bronco (11-12 yrs): _____ Pony (13-14 yrs): _____ Colt 15-16 yrs): _____

Previous Coaching Experience (League, Location, Dates, Age Group): _____

Have you ever been convicted of a felony crime by any court of law: _____ Yes _____ No
If yes, when: _____ Nature of Offense: _____

In submitting this application, I will do my utmost to support the league in all of its activities, abide by its By-Laws and rules, attend its meetings, and help prepare and improve the playing facilities. I hereby certify that all statements made on this application are true and correct to the best of my knowledge. I understand that any misstatements or omissions of any material fact may be cause for my disqualification, suspension, or dismissal from the league. I also hereby grant permission for San Jose Pacific Pony Baseball League and/or its agents to verify the information on this application by conducting a background evaluation on my qualifications as a manager or coach in the above designated division.

Signature: _____ Date: _____

FOR LEAGUE USE ONLY

Application has been _____ Approved _____ Rejected by the SJPPB Board of Directors

President's Signature: _____ Date: _____

San Jose Pacific Pony Baseball, Inc. P.O.Box 36115, San Jose, CA 95158; (408) 536-0657