

Carlsbad Youth Baseball

P.O. Box 4475, Carlsbad, CA 92018

www.carlsbadyouthbaseball.org

Manager/Coach Application

Season: _____ Year: _____

Position applied for (check one or both): Manager _____ Coach _____

First Name:	
Last Name:	
Primary Phone:	
Address:	
City, Zip Code:	
Email Address:	
Date of Birth:	
Division applying for (Shetland, Pinto, Mustang, Bronco, Pony, Colt):	
Summarize your experience in coaching/managing and instruction of youth below	
Explain briefly why you want to be a team manager or coach, in the box below	
Please list 3 people (with phone #) who could serve as references	
1) _____	
2) _____	
3) _____	