



## 2015 LaSalle Titans Manager Application Form



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

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

Home Phone No: \_\_\_\_\_ Mobile No: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

1. What team are you applying to manage?

Division							
Rookie Ball Minor		Mosquito Major		Bantam Minor		Midget Minor	
Rookie Ball Major		PeeWee Minor		Bantam Major		Midget Major	
Mosquito Minor		PeeWee Major					

Have you Managed or Coached Baseball previously: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, where?: \_\_\_\_\_

Are you willing to obtain a PRC and provide it us: Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have NCCP Certification: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what level(s): \_\_\_\_\_

If no, will you commit to obtaining the proper certification level required(s)? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have 1 or more children trying out for our teams? If so please list name and division.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Reference #1:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Reference #2:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_