



ALL STAR SEASON COACHING STAFF APPLICATION

(You must be 18 or older to manage/coach)

Name: _____ Phone Number(s): _____

Address: _____ City: _____ Zip _____

Driver's Lic. #: _____ State: _____ Date of Birth: _____

E-mail address(es) _____

All Star Team Division Requested: _____ Season: Spring 20__

Previous All Star Coaching Experience" Y/N Position(s) Previously Assigned: _____

I request to be assigned as Manager, Coach or Business Manager. (circle one)

You may designate your preference to be selected as Manager, Coach or Business Manager on this application. However, you fully acknowledge that final selection to the coaching staff and/or assignment to a specific position is at the sole discretion of the Executive Committee.

I agree that if I am selected to participate on the All Star Coaching Staff : Initials

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|---|-------|
| 1. I will attend all managers meetings or send a representative. | _____ |
| 2. I will read, understand, and abide by all league, Pony rules and the rules of any and all host leagues. | _____ |
| 3. I will be responsible for the return of all equipment and unused uniforms. I will be responsible for reimbursing the League for the cost of any unreturned equipment. | _____ |
| 4. I will be responsible for my players' and volunteers' conduct on the field. | _____ |
| 5. I will be responsible for my team's parents' conduct at the baseball complex. | _____ |
| 6. I will conduct myself in accordance with Toluca Baseball's Code of Conduct and will follow all of the stated policies included in the Toluca Baseball All Star Selection and Participation Policy. | _____ |
| 7. If I fail to perform any of the required duties, I may not be permitted to coach or manage any future league, Titan or All Star team(s). | _____ |

By signing below, I acknowledge that:

1. I will permit Toluca Baseball to conduct a limited background check to identify sex offenders, including submitting to the fingerprinting/Live Scan process, as requested.
2. Completion of this application and submission to this process does not guarantee that I will be selected to participate in the All Star Coaching Staff of any team.
3. Toluca Baseball reserves the right to partner me with a manager/coach of its selection and place me in the position on the coaching staff that it deems most appropriate.
4. I have obtained Positive Coaching Alliance Certification.

Signature: _____ Date: _____

Return this completed form to: **TOLUCA BASEBALL, PO BOX 2171, TOLUCA LAKE, CA 91610, or, The All Star Commissioner by APRIL 15th** In order to be considered for an All Star Coaching Position.

To be Completed by League Official: Date Rec'd _____ Initials: _____ Position: _____