

Warrior Baseball Coach Application Card

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

1st Age Group you desire to coach: _____

2nd Age Group you desire to coach: _____

Coaches Agreement:

- I agree to abide by the Warrior Baseball rules and regulations and the decisions made by the Warrior Baseball board members. This includes, but is not limited to, a proper code of conduct when interacting with players, coaches, and parents.
- While at the park, practice or any other Warrior Baseball affiliated venue, I agree that any form of profanity or verbal abuse is not tolerated and agree to abide by any form of restraint that the Warrior Board decides to enforce, up to and including the permanent loss of coaching privileges.
- I agree to fulfill my obligation as liaison for my team's concession duties by turning in my team's concession roster, which will include the names of pre-paid parents, 5 days before the assigned. (See a member of the Board for any help in this matter.)

Signature: _____