



Patterson Tigers

Youth County Softball & Baseball

Manager, Coach, Volunteer Application

As a PTYSB Manager, Coach, Volunteer, You will agree to but not limited to the following terms and conditions set forth by PTYSB, Stan-Co SCPBSL and the City of Patterson; I agree to follow all By-Laws, rules and regulations and uphold its standards. Further I agree that if accepted by the PTYCB that I will conduct myself in a professional manner as set forth in the code of conduct as a representative of PTYCB, SCPBSL and the City of Patterson. I will represent the PTYSB programs, community and it's participants in the best possible way. I agree to be respectful to all participants of PTYSB, City officials, Umpire and all participants, teams related to SCPBSL. I understand that as a Manager, Coach, and Volunteer I am held to a higher standard and am here to assist the youth in becoming familiar with the sport and protect their wellbeing. I understand that as an applicant I will undergo finger printing, a background check and attend a coach's clinic.

I have read and agree to all the terms and conditions. Initial _____

Name: _____ Date of Birth: _____
First MI Last

Drivers LIC. / ID#: _____ State: _____ Exp. Date: _____

Address: _____ City: _____

Home Phone:() _____ Cell:() _____

Work Phohe: _____ Email: _____

Employer: _____ Occupation: _____

Do you have children in the program? Yes No if yes, what level: _____

I would like to be considered by PTYSB for the following volunteer position; Circle all that apply from below:

Manager **Coach** **Asst.** **Softball** **Baseball** **Umpire** **Age Group:** _____

Please complete the following information to help us determine your placement in the program:

List any special Coaching training, education, work, skills or hobbies: _____

Special certificates (CPR, Coaching, Etc.): _____

Previous volunteer experience: _____

Community Affiliations (Clubs, Boards): _____

Briefly describe your demeanor on and off the field: _____

Goals and expectations for your role in the program: _____

Have you ever been denied participation in any youth program? Yes No
Have you ever been convicted of or plead guilty to any crime(s)? Yes No
Will this crime hinder your acceptance to our program? Yes No
If yes, to any please explain: _____

References 1 Name: _____ Phone: _____

References 2 Name: _____ Phone: _____

I certify that the above information is true and agree to all rules, regulations and background checks.

Signed: _____ Date: _____

For Office use only: Approved Denied Date: _____