



## HBBA Coaches Application

### Applicant Information

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Date of Birth: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Alternate Phone: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_ Have you had First Aid Training YES NO

Have you ever been convicted of a felony? YES NO

If yes, explain: \_\_\_\_\_

### Experience/Skills

Level Interested in Coaching:  K-Ball  Coach Pitch  Minors  Majors  JBO Midget  JBO Jr  JBO Sr

Were you an HBBA Coach Last Year? YES NO  
  Number of Years \_\_\_\_\_

Have you ever participated in another baseball organization? YES NO

If yes, please list program \_\_\_\_\_

List your coaching strengths: \_\_\_\_\_

What positive effects can you provide the participants in the program: \_\_\_\_\_

### References

*Please list two references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

### Participant Information

*Please list participants in this years program.*

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

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Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

Signature:

Date:

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