



## Homer Athletic Club Travel Baseball & Softball Managers Application

Fir	st Name:	Last Name:
Ho	me Address:	
Cell Phone:		Home Phone:
Email:		
Те	am Choice:	
1.	☐ Heat Baseball ☐ Heat Softball 2. ☐ Ful	ll-Time ☐ Part-Time 3. Age (example: 8U):
Ва	ckground:	
1.	Have you managed or coached HAC rec sports? $\ \square$ Yes $\ \square$ No	
2.	Have you managed or coached a travel team? $\square$ Yes $\square$ No	
3.	If yes, what was the age group and the name of the team?	
4.	Have any of your children played travel baseball or softball? $\square$ Yes $\square$ No	
5.	If yes, what was the age group and the name of the team?	
6.	What is your playing or coaching experience?	
7.	Vhat are your coaching philosophies?	
8.	this is your first year with HAC/Heat, please provide three team member or personal references:	
	Name:	Phone:
	Name:	Phone:
	Name:	Phone:

Please email completed forms to <a href="mailto:board@homersports.com">board@homersports.com</a>

All managers/coaches are subject to a complete background check