

Coach Request Form:

Youth Softball League

Coach Information:

Name: _____ Phone Number: _____

Coach Shirt Size: _____ E-Mail: _____

Are you planning on being a head or assistant coach? _____

If you are a head coach, please state clearly your one assistant coach: _____

If you are an assistant coach, please state clearly the head coach of your team: _____

Please state your child's name: _____ One mutual friend: _____

Division Coaching (Coach Pitch (5-8), 10U Kid Pitch (8-10), 12U (10-12), 14U (12-14)):

Coaches Signature (By signing this I acknowledge I am now representing myself and Blue Springs Parks and Recreation according to the rules and guidelines set out in the handbook)

Signature: _____

Team Name/Color

Teams are chosen on a first submit, first receive basis. The sooner you turn in your coach request, the better chance you have of receiving your practice time AND team color of choice.



1st Choice: _____

2nd Choice: _____

3rd Choice: _____

***filling out this form does not mean that your child is registered, it is just to make sure you are coaching your child and one additional friend.**

***Practice times will be decided at the coaches meeting by a raffle.**

***Please make sure your assistant coach fills out this form as well.**

***Below is the link to go and fill out the background check. Both assistant and head coach must fill out the background check information**

Below is the link that will take you to a page to fill out your background check:

<https://bib.com/secure-volunteer/city-of-blue-springs/>