

MEMBERSHIP APPLICATION

HAMILTON TOWNSHIP BABE RUTH BASEBALL

NAME	ME		
ADDRESS(Street)			
(Street)	(City)	(Zip) LEAGUE DESIRING TO COACH	
PHONE		☐ 13-15 yrs	☐ Prep (13 yr)
(Home) (Work) (Cell) EMAIL_			
POSITION APPLIED FOR I MANAGER I COACH LAST LEA	GUE AFFILL	AED WITH	
DATES YOU PREVIOUSLY COACHED/MANAGED			
OTHER PREVIOUS COACHING EXPERIENCE		-	
IF NOT A MANAGER WOULD YOU BE WILLING TO COACH YES NO TO C	M REQUESTI	ING	
REASON REQUESTING MEMBERSHIP			
DO YOU HAVE A SON/DAUGHTER IN THE LEAGUE? YES	NO		
SPONSOR/SPONSOR TEAM			
DATE DISAPPROVED	LEAGUE OFFICER_		
Shirt Size Jacket Size Name on Jacket_			
Rutgers Clinic Yes No Date Babe Ruth Online	Course Yes	No Date	
Background Investigation Yes No Orientation Date			