



MSMPW Coaching Application

Today's Date: _____

Applicant Name: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Team Name: _____ (i.e. Broncos, Jets, Cowboys, 49ers)

Area: _____ (North, South, Valley, West Plains)

Division: _____ (TM, MM, 4th Gr, 5th Gr, 6th Gr, etc)

Position: _____ (Head Coach or Assistant Coach)

Team Manager Name: _____ Tm MGR Phone: _____

Team Mgr email: _____ Practice Field Requested: _____

Agreement:

This application represents a commitment between INPWL and the applicant. Upon approval, INPWL will afford all rights and responsibilities to the applicant as to his/her position on the team. The applicant agrees to follow and accept all rules, responsibilities, and decisions made by members of INPWL's Board of Directors. The applicant agrees to accept the responsibilities of his/her team until the end of the regular season and post-season.

Please Do Not Write Below This Line

Volunteer Application _____

Code of Conduct _____

Coaching Clinic _____

INPWL Coaching Director