

Belen Little League

Manager Application

Belen Little League recognizes that the adult volunteers who manage our baseball and softball teams are the backbone of the organization. Managers accept primary responsibility for organizing the team and establishing a POSITIVE team environment. Please carefully complete the following information.

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Name (Last, First)					
Address					
City/State/Zip					
Email Address					
Primary Contact #		()		Home Phone #	()
Sport Requested	□ Base	eball □ Softball	Division Requested	☐ Tee Ball ☐ Rookie Junior	□ Minor □ Major □
1. Have you ever managed a Little League Team? ☐ No ☐ Yes If yes, when and where					
2. Have you ever managed another youth sport? ☐ No ☐ Yes If yes, when and where					
3. Have you ever received training as a baseball/softball manager? ☐ No ☐ Yes 4. Have you ever umpired in a baseball/softball program? ☐ No ☐ Yes 5. Have you ever volunteered in any youth organization? ☐ No ☐ Yes By applying for the position of Manager, I understand that I will promote positive teamwork, fair play and follow all Little League International and Belen Little League rules, regulations and philosophies. I further understand that I					
serve at the appointment of the Belen Little League President and approval by the Belen LL Board of Directors and therefore are subject to discipline and/or removal for violations deemed detrimental to the Belen Little League.					
Signature:				Date:	
LEAGUE USE ONLY					
☐ Appointed ☐ Not Appointed by on					
BLL President □ Approved □ Not Approved by Belen Little League Board on					
Team Ass	igned: _				
Coach 1.					