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| ***Saskatoon Cardinals Baseball Coaching Application*** | | | | | | | | | | | | | | |
| **PLEASE PRINT** | | | | | | | | | | | | | | |
| **Please complete in full, missing information may affect the success of your application.** | | | | | | | | | | | | | | |
| **Please give your application to an Executive member before April 1.** | | | | | | | | | | | | | | |
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| **Name:** | |  | | | | | | | | | | | | |
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| **Address:** | |  | | | | | | | | | | | | |
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| **Home Phone:** | |  | | |  | | **Work Phone:** | | |  | | |  | |
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| **Place of Employment:** | | |  | | | | | | | | | | | |
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| **Birth Date:** | | |  | | | | | |  | | | | | |
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| **NCCP NUMBER:** | | |  | | | | | |  | | | | | |
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| **Please indicate the age group you are interested in coaching:** | | | | | | | | |  | | | | | |
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| **Jr. Rally** |  | | | **Sr. Rally** | |  | | **Mosquito** | | |  | | | |
| **PeeWee** |  | | | **Bantam** | |  | | **Midget** | | |  | | | |
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| **Please indicate if there is a specific level you are interested in coaching:** | | | | | | | | | |  | | | | |
|  | | | | | | | | | | | | | | |
| **Do you have any obligations that restrict the amount of time you can allot to coaching?** | | | | | | | | | | | | **Yes** | | **No** |
|  | | | | | | | | | | | | | | |
| **Are you willing to coach a team your child (if any) is not on?** | | | | | | | | | | | | **Yes** | | **No** |
|  | | | | | | | | | | | | | | |
| **Please indicate the age groups that your own children (if any) will be registered with for the upcoming season (if applicable)** | | | | | | | | | | | | | | |
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| **Jr. Rally** |  | | | **Sr. Rally** | |  | | **Mosquito** | | |  | | | |
| **PeeWee** |  | | | **Bantam** | |  | | **Midget** | | |  | | | |
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| **Coaching Certification Information: Please include the coaching level completed, date completed and location of the course. Ensure that you also include the Theory clinics taken.** | | | | | | | | | | | | | | |
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| **Please detail your previous experience as a head coach, assistant coach, manager or other team official: (please use another sheet if necessary)** | | | | | | | | | | | | | | | | | | | | |
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| **Team:** |  | | | **Level:** | |  | | | **Position:** | | | |  | | | | | **Year:** | |  |
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| **Team:** |  | | | **Level:** | |  | | | **Position:** | | | |  | | | | | **Year:** | |  |
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| **Team:** |  | | | **Level:** | |  | | | **Position:** | | | |  | | | | | **Year:** | |  |
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| **Team:** |  | | | **Level:** | |  | | | **Position:** | | | |  | | | | | **Year:** | |  |
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| **List any other coaching experience you feel is relevant and include what position you held with the team, years involved & what organization you were involved with:** | | | | | | | | | | | | | | | | | | | | |
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| **Team** | | | | |  | | **Position** | | | | | | | | | |  | | **Year** | |
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| **REFERENCES - Please provide two references the Zone may contact about your involvement with baseball or Minor sports in general:** | | | | | | | | | | | | | | | | | | | | |
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| **Name** | |  | | | | | |  | | **Name** | | | |  | | | | | | |
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| **Address** | |  | | | | | |  | | **Address** | | | |  | | | | | | |
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| **Home Phone** | |  | | | | | |  | | **Home Phone** | | | |  | | | | | | |
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| **Work Phone** | |  | | | | | |  | | **Work Phone** | | | |  | | | | | | |
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| **Number of Years Known** | | |  | | | | |  | | **Number of Years Known** | | | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | | |
| **DECLARATION:** | | | | | | | | | | | | | | | | | | | | |
| **I have completed this application and understand that any errors or omissions in information may result in voiding this application. If accepted for a coaching position, I agree to be bound by the rules & regulations of the Saskatoon Cardinals Baseball organization and I agree to be responsible for the appropriate conduct of my coaching staff, other team officials and agree to the 'Cardinals Program Philosophy'. I understand that submitting this application does not guarantee me a coaching position, and that I may be required to provide a criminal record check from the local police authority.** | | | | | | | | | | | | | | | | | | | | |
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| **Signature of Applicant:** | | |  | | | | | | | |  | **Date:** | | | |  | | | | |
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| **Cardinals Representative:** | | |  | | | | | | | |  | **Date Received:** | | | |  | | | | |