

*Oquirrh Mountain Girls Softball Association*  
**COACH'S APPLICATION**  
(You Must Be At Least 21 Years Of Age)

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**AGE GROUP (Please circle):** TBall    8U    10U    12U    14 U    18U  
**ADULT SHIRT SIZE (Please circle):**    S    M    L    XL    2XL    3XL    Other (please specify) \_\_\_\_\_  
**SHIRT COLOR:** 1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

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Coach's Name: \_\_\_\_\_ Cell: \_\_\_\_\_ Home: \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Email (A MUST): \_\_\_\_\_

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Have you ever been a coach for OMGS? \_\_\_\_\_ If yes, which age group? \_\_\_\_\_  
Have you ever coached in other leagues? \_\_\_\_\_ Where? \_\_\_\_\_  
Do you understand the fundamentals of softball? YES NO    Daughter(s) Full Name: \_\_\_\_\_  
What is your goal in coaching this team? \_\_\_\_\_

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**Preference will be given to coaches with daughters/relatives playing in the league.** IF you are chosen by the OMGS Board to be a coach, you will be notified on or before **MARCH 10, 2015**. You will be entitled to select four (4) girls that you want on your team. Your daughter (and/or relative), your assistant coach's daughter (and/or relative) PLUS their friends whom are listed on each other's registration form ARE considered as part of your four picks. The OMGS Board will choose the balance of your team. **You must be able to hold practices before and during league play.**

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**PLEASE READ CAREFULLY**

I will exemplify good SPORTSMANSHIP and my team and I will follow all rules of ASA and OMGS. I will be a good role model when representing OMGS on and off the field. I will treat all players and parents on any team fairly and with respect and support. I have been informed how OMGS will select all-star coaches and players and agree to adhere to that selection process. I understand that the OMGS Board has the right to terminate me as a coach for failing to do any of the above. I will stand by all decisions made by the OMGS Board Members before and during league and all-star tournament play.

In addition to the above, I understand that:

- a. I will **not** be allowed to attend practices, games or other team activities under the influence of alcohol or drugs. If anyone brings this to the attention of any OMGS board member, this will be grounds for immediate termination of my coaching position.
- b. In applying for an OMGS position, the information, which I have furnished on this application, is subject to verification, which will include a criminal history check.
- c. It is the intent of OMGS to deny any position to any person whose criminal background history returns information falling within the parameters as set by the OMGS Board of Directors.

Coach's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**OMGS BOARD MEMBERS ONLY**

Board Member Initials: \_\_\_\_\_ Date: \_\_\_\_\_ Age Group: \_\_\_\_\_ Team Color: \_\_\_\_\_

**PLAYER(S) SELECTED:**

1. \_\_\_\_\_ 3. \_\_\_\_\_  
2. \_\_\_\_\_ 4. \_\_\_\_\_