



Learn it, Live it Love it – Leduc Giants Baseball

Leduc Baseball Association (LBA)
Suite 726, 5101 – 50th Avenue
Leduc, Alberta

COACHING APPLICATION

Name:	PH(h):
Address:	PH(b):
	PH(cell):
City:	FX:
Postal Code:	Email:

COACHING POSITION PREFERRED

	Head/Asst.	Rec/Comp/Wherever child is
1st Choice		
2nd Choice		

COACHING QUALIFICATIONS

Certification Levels	Dates of Certification

COACHING EXPERIENCE

Association	Age	Gender	League	Year

REFERENCES

Name	Relationship to Applicant	Phone

POLICE AND INTERVENTION CHECKS ARE MANDATORY FOR ALL COACHING/MANAGING POSITIONS

SECURITY CLEARANCE (for office use only)

Police Records Report Dated:



LEDUC BASEBALL ASSOCIATION

Suite 726, 5101-50th Avenue
Leduc Ab. T9E 0B9

DATE: _____

RE: LEDUC BASEBALL ASSOCIATION (LBA)

This letter is to certify that the bearer of this letter, _____ is a member of the Leduc Baseball Association and is requesting that a criminal check with the vulnerable sector be completed for the LBA 2017 season.

The individual presenting this letter is a potential Coach and would be working with children aged 4 to 17 within our baseball association.

Should you have any questions or require further information please contact me at 780-242-2016

Thank you in advance for your assistance and support,

Trent Mcintosh

Coach Coordinator

Leduc Baseball Association