

Cape Girardeau Parks & Recreation Department 2012 Girl's Softball League Coach's Form

Coach's Name _____ Player's Name _____
First MI Last

Address _____ City/State/Zip _____

Primary Phone # _____ Secondary Phone # _____

Email Address _____ Mark One: _____ Head Coach _____ Assistant Coach

Social Security # _____ (for background check purposes only) Birthdate ____/____/____

*A mandatory background check will be completed on every coach

Check division you would like to coach:

_____ Instructional/T-Ball (ages 5-6) _____ Rookie/Coach Pitch (ages 7-8) _____ AA (ages 9-10)

_____ AAA (ages 11-12) _____ Majors (ages 13-15)

Mark T-shirt Size: _____ Small _____ Medium _____ Large _____ XL _____ 2XL

List any previous coaching or playing experience _____

Head Coaches Only:

Do you have an assistant coach (only 1 asst.)? _____ Yes _____ No

If yes, assistant coach's name: _____

Assistant Coaches Only:

Have you chosen a head coach you would like to coach with? _____ Yes _____ No

If yes, head coach's name: _____

Coach's Form may be mailed to:

Cape Girardeau Parks & Recreation Department
Attn: Girl's Softball League
410 Kiwanis Drive
Cape Girardeau, MO 63701

Coach's Form may be turned in to:

A. C. Brase Arena (preferred): Monday – Friday 8:00 a.m. – 5:00 p.m.

Shawnee Park Center: Monday – Sunday during regular operating hours

*Registration forms may also be turned in at any of the skills test dates listed below

**The Girl's Softball League coach's meeting/player draft will be held on
Thursday, April 19th at 6:00 p.m. at the Osage Centre.**

Player Skills Test Dates

Thursday, April 5, 2012
5:00 p.m. – 7:00 p.m.
Arena Park Softball Fields

Monday, April 9, 2012
5:00 p.m. – 7:00 p.m.
Arena Park Softball Fields

Wednesday, April 11th
5:00 p.m. – 7:00 p.m.
Arena Park Softball Fields

* Any coach that would like to help with any of the player skills test dates should contact Heather Davis at the phone number or email address listed below

* Coaches are also welcome to attend to evaluate players

For more information contact League Director, Heather Davis, at 339-6340 or
hdavis@cityofcapegirardeau.org

Coach's signature _____

_____/_____/_____
Date