

Southlake Girls Softball Association Coach Registration Form

Name: _____ Home Phone: _____

Address: _____ Work Phone: _____

City, State, Zip: _____

E-mail Address: _____

Ages of your children registering with SGSA as of January 2, 2008:

Do you prefer: **Manager** or **Assistant Coach**

I wish to register with the following Manager/Coach: _____

Division(s) you desire to coach:

6 and Under

8 and Under

10 and Under

12 and Under

14 and Under

16 and Under

I understand that registering my desire to coach an SGSA team is not a guarantee that I will be assigned a team. Coach selection is at the sole discretion of the SGSA Board of Directors. If chosen, I agree to attend a **coaches' orientation meeting** scheduled for Tuesday, September 2 from at the Lodge at Bicentennial Park in Southlake.

Signature

Date