



**Travel Coaches Application and
Background Check Form
2018 Season**

MAIL FORM TO:
SOUTH LYON JUNIOR LEAGUE
P.O. BOX 455
SOUTH LYON, MI 48178-0455



Please fill out completely; Applicants signature is required. Please mail to the South Lyon Junior League Board for approval. Note: Failure to complete all the information will make you ineligible to coach within the South Lyon Junior League Travel Baseball / Softball program.

Full Name: _____

Address: _____
Street Address

_____ City _____ State _____ Zip Code

Contact: _____ - _____ - _____ **Alt:** _____ - _____ - _____
Primary Phone Number Alternate Number

Circle level and gender coached during 2017 Season

2017 Team Level: 8U 9U 10U 11U 12U 13U 14U 15U 16U 18U (Boys or Girls)

Circle desired level and gender of coaching for 2018 Season

2018 Team Level: 8U 9U 10U 11U 12U 13U 14U 16U (Boys or Girls)

Information Required for Background Checks:

Date of Birth: _____ **Sex:** M or F

Race: _____

The information requested above is required by the background check system utilized by the Michigan State Police.

I, the undersigned, do hereby certify that the above information is correct. I have been advised that as a coach in the South Lyon Junior League, the association will conduct a criminal history background check. Once the background check has been completed, this form will be destroyed.

I have reviewed the by-laws of the South Lyon Junior League and if selected agree to abide by them in their entirety. I realize that failure to do so may result in disciplinary action and/or dismissal at the discretion of the South Lyon Junior League Board.

Applicant's signature Date