

CENTRAL CHESTERFIELD LITTLE LEAGUE

All-Star Manager Application

NOTE: If you wish to Manage or Coach on more than one All-Star team, please submit a separate application.

Name _____ Manager or Coach (circle one)

Address: _____

Phone Number(s): _____

E-mail address: _____

Current Level Coached: **Rookie** **Minor** **Major-Minor** **Major** **Junior** **Senior** (circle one)

Team Name: _____

All-Star level you wish to manage: _____ District 5 or Invitational? _____

Please take a moment to briefly answer this questionnaire.

1. What is your primary reason for wanting to manage an All-Star team?

2. Are you currently managing or coaching any other team (any sport) that will hinder your commitment to this team at any point throughout the duration of the tournament?

3. How will you choose your assistant coaches?

4. How do you handle discipline on your team?

5. How do you handle parental conflicts?

6. How will you establish your batting order? Why?

7. What is your method for meeting substitution requirements?

Signature _____ Printed Name _____ Date _____

***** This application must be received by the CCLL board no later than May 1st, 2007. *****