

Dr. Phillips Little League Consideration for All-Star Manager or Coach

Please complete this application and return it to the DPLL league president at nomifla@gmail.com

Name:			DOB: _	
Are you interested in:	☐ Managing	☐ Coaching		
For which All-Star team(s):	:			
☐ 8-9 All-Stars (league ag	es 8 & 9)			
☐ 8-10 All-Stars (league a	ges 8,9 & 10)			
☐ 9-11 All-Stars (league a	ges 9, 10 & 11)			
☐ Little League All-Stars (league ages 10, 11	& 12)		
☐ Juniors All-Stars (league	e ages 13 & 14)			
Home Address:			Zip:	
Home or Mobile Phone:			_	
Email:				
Experience managing/coac	ching at Dr. Phillips	Little League:		
☐ Less than 1 year ☐	2-4 years	– 7 years 🔲 8+ ye	ears	
Spring 2022 Team(s):	Manager 🚨 Coa		☐ Manager	☐ Coach
Please provide some detail team:	s as to why you cor	nsider yourself a good	candidate to ma	inage or coach a DPLL All-Star
Signature			Date	