

ARIZONA MEN'S SENIOR BASEBALL LEAGUE

TEAM MANAGER APPLICATION

CONTACT INFORMATION			
Name		XXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXXXXXXXXXXXX
Address		Date	Years in the League
Main Phone			
E-mail			
Team/Division			

AGREEMENT (INITIAL)

1. I shall be responsible and agree to have any and all players sign a waiver before entering the field for any practice or game _____
2. All Team fees will be paid according to the scheduled dates _____
3. As Manager, I will abide by and uphold the league rules as amended from time to time _____
4. As Manager, I will follow the AZMSBL Code of Conduct _____
5. As Manager, I accept full responsibility for my team and the conduct of my players _____

SIGNATURE			
Signature			
Date			