Nevada County Girls Softball Association (NCGSA) All Stars Coach Application

Please complete the following information if you are interested in coaching an All Stars Team. The NCGSA Board will review the information you provide to make an informed decision. Please contact us at board@ncgsa.org if you have any questions. Please print clearly.

Your N	ame:						
Phone	ne:		Email:	Email:			
Please	indicate yo □ Head Co	our coaching/volu	nteer preference Assistant Coach	(check all that	apply):		
What a	age level ard	e you requesting	to coach?	□ 14 U	□ 1 6U		
Can yo	u commit t	o being present to □ NO	o coach every All	Stars tournam	ent this season?		
Please	tell us why	you are intereste	d in coaching an	All Stars team:			
Have y	ou ever coa	ached an All Stars	softball team?				
How m	nany years o	of experience do y	ou have coachir	g girls' softball	?		
How m	nany years o	of experience do y	ou have playing	softball?			
Please	tell us abou	ut your experienc	e coaching and p	laying softball	and other sports:		