



HIGHLAND VILLAGE

BASEBALL & SOFTBALL ASSOCIATION

MANAGEMENT APPLICATION FOR CONCESSION STAND

This application provides HVABSA with the pertinent information needed to determine potential management personnel for the Concession Stand. Please print legibly and in pen.

Date _____ Social Security # _____

Last Name _____ First Name _____

Home Phone _____ Cell Phone _____

Date of Birth _____ E-mail _____

Street Address _____

City _____ Zip Code _____

Emergency Contact Name _____

Emergency Contact # _____ T-Shirt Size _____

(2) Do you have any conflicts with working on weeknights?

(3) Do you have any conflicts with working on Saturdays?

In order for your application to be considered, we will need your signature which is your consent to a background check. If chosen as a manager for the concession stand, you must attend orientation and training with the workers.

Applicant Signature _____ Date _____