

**Hosted by:**  
**Crieve Hall  
Baseball**

**Open to ALL**



**New Baseball Coaches'  
Certification Program**

For more information, go to  
www.doylebaseball.com

**About Doyle Academy**

Doyle Baseball was founded in 1978 by Denny Doyle and his twin brothers, Brian and Blake. Playing with and against the best, on pennant winners and World Series teams for a combined 30 years professional baseball experience, has helped lay the foundation for Doyle Baseball to develop its unique teaching methods, leading to the game's most innovative and respected training programs.

**Players School – Mar 27-28**

|                              |  |
|------------------------------|--|
| <b>Date:</b>                 | Mar 6, 2010  |
| <b>Times:</b>                | <b>Check In 12:45 pm</b><br>1 – 4 pm                                       |
| <b>Location:</b>             | Crieve Hall Major Field  |
| <b>Cost:</b>                 | Head Coaches Paid for by<br>Crieve Hall Baseball<br>All others \$25 – each |
| <b>For more information:</b> | Chip Cruze<br>615-596-7223   |

**With Doyle Coaches' Certification You Receive:**

- ✔ **\$2,000,000 personal liability**
- ✔ **Hands on training techniques**
- ✔ **Practice organization tips and handouts**
- ✔ **Skill development and skill drills**
- ✔ **Drill solutions**
- ✔ **Printed terminology**
- ✔ **Safety and first aid issues**
- ✔ **Hitting devices available to purchase on site**

**DOYLE ENROLLMENT APPLICATION**

**Must be completed to receive Certification. Please print & complete all sections. Use one application per coach.**

Last Name \_\_\_\_\_  
 First Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone (      ) \_\_\_\_\_  
 E-Mail Address \_\_\_\_\_ (for future updates)  
 Occupation \_\_\_\_\_  
 Age group that you coach \_\_\_\_\_  
 Have you previously attended Doyle Baseball?    \_\_\_\_ YES    \_\_\_\_ NO  
 If YES, where & when?  
 Would you be interested in becoming a Doyle Staff Instructor: \_\_\_\_\_

**Nashville/Crieve Hall, TN  
Mar 6, 2010**

\$25 per coach

Mail application & payment to:  
Crieve Hall Baseball  
5110 Kincannon Dr  
Nashville, TN 37220

**Make checks payable to:  
Crieve Hall Baseball**

**ACCIDENT INSURANCE INFORMATION - MUST BE COMPLETED TO ATTEND THE PROGRAM** - All coaches must provide proof of insurance coverage for any injury or sickness while attending Doyle Baseball. I waive and release Doyle Baseball from any injury or illness incurred going to school from home or while at school or returning from school to home. I hereby give my permission for emergency treatment in the event I cannot be reached.

**PAYMENT INFORMATION**

\_\_\_\_ Check    \_\_\_\_ Cash    \_\_\_\_ Visa    \_\_\_\_ MasterCard    \_\_\_\_ AmEx  
 Card Number \_\_\_\_\_ Exp. \_\_\_\_\_  
 Cardholder Name \_\_\_\_\_  
 Signature \_\_\_\_\_

**Acceptance of Accident Insurance Disclaimer Above**

Name of Insurance Co. \_\_\_\_\_  
 Policy Number \_\_\_\_\_  
 Student Signature \_\_\_\_\_