

2010-2011 AAA COYOTES COACH APPLICATION



Name:			
Address:			
Home Phone: ()		Bus Phone: ()	
Email Address:		Cell Phone: ()	
TEAM SELECTION			
1 st Choice:			
2 nd Choice:			
If your choices are not available, would you be willing to coach another team?			
COACHING/TRAINERS CERTIFICATION <i>(Please fill out all applicable areas)</i>			
Coaches/Trainers	Yes or No	Year Attained	Date of Expiry
C.H.I.P			
Coach Level			
Intermediate			
Advanced			
Trainers Level			
First Aid			
Prevention Services			
PLEASE NOTE: All coaches/trainers must have or be prepared to take the appropriate clinics by August 31, 2010			
EXPERIENCE: <i>Please list your past coaching experience</i>			
Season: 20 _____ - _____		Association:	Duties
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Please attach your personal resume, reflecting your coaching experiences and any other information which is not detailed in this application (i.e. employment, playing experience, other interests etc.) Plus include (if known at this time) detailed information on all members of your intended coaching staff. Any additional information provided pertaining to the following would also be appreciated.

What is the anticipated role of your co-coaches, assistants, managers and trainers:

What would be some of your anticipated tournaments etc?

What are your team initiatives, objectives and goals?

REFERENCES: Please list three references i.e. parent, professional etc.

NAME	HOME #	BUS #	SIGNATURE

I, _____ authorize Richmond Hill Hockey Association to collect personal information appropriate to the position applied for concerning my academic background, employment history, and verify the character references I have supplied.

I understand that the information obtained will be confidential but may be shared with relevant organizations in order to obtain a appropriate volunteer position.

Signature

Day Month Year

Please be aware that all coaches, assistant coaches, trainers, and managers of Rep teams are required to input a Police Record Check form as supplied by the York Regional Police. These MUST be obtained from our Hockey Office only. Mail or Fax completed Coach Application to:

Attention: COYOTE COACH SELECTION COMMITTEE
10660 Yonge St. P.O. Box 30556, Richmond Hill, ON L4C 0C7

Phone: 905-770-0550 Fax: 905-770-7712 email: hockeyoffice@richmondhillstars.com

Administrative Office: Elgin Barrow Arena

www.richmondhillstars.com

SUBMISSION DEADLINE: DECEMBER 06, 2009