



# Revelstoke Minor Hockey Association Coaching Application

Name: \_\_\_\_\_

(Given)

(Middle)

(Surname)

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### Preferred Coaching Assignment

| Division         | 1 <sup>st</sup> Choice | 2 <sup>nd</sup> Choice |
|------------------|------------------------|------------------------|
| Pre-Novice       |                        |                        |
| Novice           |                        |                        |
| Atom Development |                        |                        |
| Pee-wee Rep      |                        |                        |
| Bantam Rep       |                        |                        |
| Midget Rep       |                        |                        |
| Female           |                        |                        |

(Please indicate “Head Coach” or “Assistant Coach” for your 1<sup>st</sup> and 2<sup>nd</sup> Choice)

**Certification/Training**

| <b>Certification/Training</b>                | <b>Year Completed</b> | <b>Location</b> |
|--|-----------------------|-----------------|
| NCCP Theory 1                                |                       |                 |
| NCCP Theory 2                                |                       |                 |
| The National Coach Mentorship Program (NCMP) |                       |                 |
| Safety (HCSP)                                |                       |                 |
| Respect in Sport (Speak Out)                 |                       |                 |
| Coach Level (Coach Stream)                   |                       |                 |
| Checking Clinic                              |                       |                 |
| Hybrid Clinic                                |                       |                 |
| Developmental 1                              |                       |                 |
| High Performance Stream                      |                       |                 |
|  |                       |                 |
|  |                       |                 |

**Other Certificates/Training**

| <b>Certificates/Training</b> | <b>Year Completed</b> | <b>Location</b> |
|------------------------------|-----------------------|-----------------|
|                              |                       |                 |
|                              |                       |                 |
|                              |                       |                 |
|                              |                       |                 |
|                              |                       |                 |
|                              |                       |                 |
|                              |                       |                 |

**Coaching Experience: (List in order, starting with the most recent)**

| <b>Year</b> | <b>Association</b> | <b>Age Group</b> | <b>Position</b> |
|-------------|--------------------|------------------|-----------------|
|             |                    |                  |                 |
|             |                    |                  |                 |
|             |                    |                  |                 |
|             |                    |                  |                 |
|             |                    |                  |                 |

## **Other Sports**

| <b>Year</b> | <b>Sport</b> | <b>Age Group</b> | <b>Position</b> |
|-------------|--------------|------------------|-----------------|
|             |              |                  |                 |
|             |              |                  |                 |
|             |              |                  |                 |
|             |              |                  |                 |

- 1) I hereby consent to disclosure of the above information.**
- 2) I hereby acknowledge the authority of the CHA, BCHOCKEY, OMAHA, and Revelstoke Minor Hockey Association and agree to carry out and abide by their constitution, bylaws, rules and regulations.**
- 3) I hereby acknowledge that I have read and understand the coach's role as outlined in the "Coaches Code of Conduct" attached to this Coaching Application form.**
- 4) I hereby agree to familiarize myself with the National Coaching Certificate Program (NCCP) requirements for coaching minor hockey and ensure that I maintain the required level of certification.**
- 5) By way of this application, I give permission to Revelstoke Minor Hockey Association to pursue a criminal record search on myself.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Coaching Applications must be received by Revelstoke Minor Hockey Association NO later than May 16, 2011.**

**Mail To: Revelstoke Minor Hockey Association  
Box 2788,  
Revelstoke, B.C. V0E 2S0**

**Email: [rmhockey@telus.net](mailto:rmhockey@telus.net)**

