



COACH APPLICATION FORM

2010-2011 Season

Name: _____

(given) (middle) (surname)

Address: _____ Postal Code: _____

Phone: (h) _____ w) _____ (c) _____

Fax#: _____ E-mail: _____

Birth Date: _____ Place of Birth: _____

Employer: _____ Occupation: _____

Employers Address: _____ Shift Work: YES NO

Preferred Coaching Assignment

House Rep Development

Initiation N/A N/A _____

Novice N/A _____

Atom N/A _____

Pee Wee _____

Bantam _____

Midget _____

(Please put 1 as your first choice and 2 as your second)

Certification/Training

Course: Year Completed Location

NCCP Theory 1 _____

NCCP Theory 2 _____

Initiation Program _____

Coach Level/Coach Stream _____

Intermediate/Development 1 _____

Advanced Level 1 or 2 _____

HCSP _____

Speak Out _____

Checking Clinic _____

(NCCP-National Coaching Certificate Program)

Other Coaching Courses or Training

Hockey Coaching Experience _____

Year Association and Team Name Age Group Position

(List in order, starting with the most recent) _____

Other Sports _____

Year Sport Association Age Group _____

Playing Experience _____

Year Association & Team Name Age _____

Briefly describe your Coaching Philosophy

Briefly describe your Season Plan

Please include your goals for the team, your thought on rules and discipline and overall player development philosophy as well as any other pertinent information.

Sample Practice Plan *(on a separate paper and attached to this application)*

Please prepare a sample practice that is age appropriate for the team you are applying for. If you are applying for teams in different age groups, prepare a sample plan for each.

Questions *(please circle appropriate response)*

Do you have a child registered with CMHA? YES NO

If a Coaching position were not available in the age group of your choice, would you be willing to coach in another division or help out with skill clinics? YES NO

(If YES, which Division? _____)

Do you feel your child will make the team for which you are applying? YES NO

Will you coach the team if an independent committee does not assess you child to make the team?
YES NO

Are you certified for the level for which you are applying? YES NO

If you are not certified at the required level, are you available to take a weekend course to attain the required level? YES NO

Undertaking

1. I hereby consent to disclosure of the above information.
2. I hereby acknowledge the authority of Hockey Canada, BC Hockey, WHMHA and Castlegar 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 the forming part of this application.
4. I hereby agree to familiarize myself with the National Coaching Certification Program 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 CMHA to pursue a criminal records search on myself.

Signature: _____ **Date:** _____

Please remit your completed application form at the Castlegar Complex Minor Hockey Mailbox; please ask at the Reception desk, attention: Grant Pilla. Be sure to include the completed signed application, signed Team Official's Contract and sample practice plan.

Team Official's Contract

It is the intention of this Contract to promote fair play and respect for all participants within the Association. All coaches must sign this Contract before being allowed to participate in hockey and must continue to observe the principles of Fair Play.

Fair Play Code

I will be reasonable when scheduling games and practices remembering that young athletes have other interests and obligations.

I will teach my players to play fair and to respect the Rules, Officials, Opponents and Teammates.

I will ensure all players receive equal instruction, discipline, support and appropriate fair play time.

I will not ridicule or yell at my players for making mistakes or for performing poorly. I will remember that children play to have fun and must be encouraged to have confidence in themselves.

I will make sure that equipment and facilities are safe and match the players' ages and ability.

I will remember players need a coach they can respect. I will be generous with praise and set a good example.

I will obtain proper training and continue to upgrade my coaching skills

I agree to abide by the principles of the fair play code as set by the Canadian Hockey Association and supported by Castlegar Minor Hockey Association.

I also agree to abide by the Rules, Regulations and Decisions as set by the Castlegar Minor Hockey Association.

Name: _____ Date: _____

(please print)

Signature: _____ Team Official: _____