Richmond Minor Hockey Association Application for Returning Coaches



Please complete this form in full and deposit it in our Richmond Ice Centre Forum Rink mailbox

or

email to coach.rmha@gmail.com

or

or mail it to P.O. Box 94488, Richmond, B.C. V6Y 2V6 Please address your envelope to **COACH COORDINATOR RMHA**

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Home Phone

Mobile Phone

E-mail

Division(s) and level(s) you are applying to

coacn

Will you potentially have a child on the team? Yes No

If yes, what team(s) did your child(ren) play on last season?

Your Coaching Qualifications

N.C.C.P. # (if known)

Please list all Coaching Certification Programs, including completion date(s)

HCSP (Safety)

Concussion Awareness Training Tool

Respect in Sport

Yes

No

Yes

No

Date

Signature