

**Orillia Girls Hockey Association**  
**House League Coaching Application Form**

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

Phone (Cell): \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Position Applying For (check one)**

Division		Division	
U7		U13	
U9		U15	
U11		U18	

- Will you have a child playing in the division you have applied for?    Yes     No

**Previous Coaching Experience**

Year	Team	Division	Position

**Coaching Clinics/Courses Obtained**

Certification	Trained / Certified	Year	Other Relevant Information
Coach 1 Intro			
Coach 2 Level			
Development 1			
High Performance 1			
Respect in Sport (Coach)			
HTCP 1/2/3			
Making Ethical Decisions			
Police Records Check			

- Provide a describe your coaching philosophy:

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Other relevant hockey coaching/playing/volunteer experience:

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**References** (please provide three references)

Full Name	Contact Information (email, phone numbers, etc)

**Declaration**

I, \_\_\_\_\_, declare that all the information I have provided is accurate and true. I agree to follow the Bylaws, Regulations and Policies as set out by OGHA, OWHA, OHF Hockey and Hockey Canada

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

Signature: \_\_\_\_\_

Date: \_\_\_\_\_