**HEAD COACH & ASSIATANT COACH APPLICATION**

Blackfalds Warriors Lacrosse Association Head Coach \_\_\_\_

Box 337

Blackfalds, AB T0M 0J0 Assistant Coach \_\_\_\_

**Please Print All Information Clearly**

Coach’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: (optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/Province: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do You Have Children Playing?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Child’s Name Child’s Team Date of Birth

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Name Child’s Team Date of Birth

**Check Program Preference**

6U \_\_\_ 8U \_\_\_ 10U \_\_\_ 12U \_\_\_ 14U \_\_\_ 16U \_\_\_

**Coaching Certification** (please attach a copy of your card to this application)

|  |  |  |  |
| --- | --- | --- | --- |
| Certification | Yes or No | Year Completed | Intend to Complete |
| Community development |  |  |  |
| Comp Intro |  |  |  |

**Coaching Experience:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Team Position From Date to Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Team Position From Date to Date

**Community Involvement, list any youth activities you’re involved in:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Position From Date to Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Organization Position From Date to Date

**Coaching References:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Phone

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name Phone

**Disciplinary reviews:** Have you ever been involved in a disciplinary review while coaching a youth sports team?

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Criminal Record Check:**

Each year a Criminal background clearance form is required before any coach, assistant coach or manager will be authorized to conduct any activities involving BWLA players.

**RCMP Criminal Records Check must be submitted with application.**

**3 Strike rule for Coaches:**

1. Be responsible for my own behavior and the behavior of my teammates.
2. Never physically, verbally, or mentally harm a child in my care.
3. Lead by example and encourage my team members to play by the league rules and respect the rights of other players, coaches, officials, and fans.
4. Provide a sports environment for my team that is free of drugs, tobacco, alcohol and abusive language and refrain from their use at all sporting events.
5. Make every effort to improve my knowledge of coaching techniques so that I can teach the sport properly to my players.
6. Obtain, read, and abide by the rules and guidelines for the league.
7. Lace the emotional and physical well-being of my players ahead of a personal desire or external pressure to win.
8. Ensure that my players are supervised by myself and another adult and never allow my players to be left unattended or unsupervised at a game or practice.
9. Never knowingly permit an injured play to play or return to the game without proper medical approval.
10. Ensure that all equipment used by my players is safe and conforms to the rules of the game. I shall not allow illegal or unsafe equipment to be used.
11. Respect the game and league officials and communicate with them in an appropriate manner.
12. Be knowledgeable of the league rules and regulations and teach these rules to all players.
13. Begin and end practice on time.
14. Ensure all players have an opportunity to improve their skills.
15. Will attempt to play all players equally over the course of the year.
16. Create a playing environment that is well organized, professional, and fun.

**PLEASE EMAIL THIS APPLICATION FORM AND ALL APPLICABLE DOCUMENTS TO:** [**blackfaldslacrosse@gmail.com**](mailto:blackfaldslacrosse@gmail.com)

If you feel there is additional information which is relevant, please attach the information to this application.

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Signature Date