

Lakeland Lacrosse Association

Team Manager Application

Name: _____ Birth Date: ____/____/____ (yy/mm/dd)

Home and Mailing address:

Telephone #: Home: _____ Cell: _____ Office: _____

Email Address _____

I would like to be a Team Manager: _____

Location: Bonnyville: _____ Cold Lake: _____

Team Divisions:

Mini Tyke: ____ Tyke: ____ Novice: ____ Pee Wee: ____ Bantam: ____ Midget: ____ Girls: ____

First Aid Yes ____ No ____ Level _____

Player parent contract Signed yes ____ No ____

Have you ever been involved with a disciplinary review? Please give details.

NOTE: A Criminal background check is required before any Coach, Assistant Coach or Team Manager will be authorized to conduct any activities involving any Lakeland Lacrosse Association players under the age of 18. A Female Assistant must be present as per ALA regulations; if there are Co Ed teams due to any issues that may arise. RCMP Criminal Checks must be submitted with this application.

Witnessed submission of the RCMP Criminal Background Check Form: Yes _____ Expiry Date:

Witness: _____ Signature:

_____ Date: _____

*Send application via email to the appropriate Division Director.