



Paradise Soccer Club

Coach Reimbursement/Remuneration/Discount Request Form

Applicant Information

Full Name: _____ Date: Day / Month / Year
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City Province Postal Code

Phone: _____ Email _____

Current Team/Position at Time of Request (if applicable): (eg BU13 PYL Head Coach) NCCP #: _____

Previous Team/Position/Year (if relevant to this application): (eg BU11 Metro Head Coach 2016/17)

Are you actively coaching with PSC? YES NO

If Yes, Have you submitted RNC forms this season? YES NO If no, have you attached the forms with this application? YES NO

Office Use - Approved By:		Date: <u>Day / Month / Year</u>	Total Discount Requested:	
Office Use - Approved By:		Date: <u>Day / Month / Year</u>	Total Amount Requested:	

Coaching Certification Registration Fee Reimbursement (Community Stream)

Please Indicate Course Taken... **Active Start** Hosted by: _____
Fundamentals Hosted by: _____
Learn To Train Hosted by: _____
Soccer for Life Hosted by: _____

Course Dates (day/month/year) From: Day / Month / Year To: Day / Month / Year Course Fee Amount Inc HST: _____

Proof of Payment Receipt Enclosed? YES NO Proof of Completion The Locker Profile Transcript Enclosed? YES NO Other: _____

Have you completed, Making Headway & Making Ethical Decisions? YES NO Proof of Completion The Locker Profile Transcript Enclosed YES NO

Have you completed Respect in Sport (Version for Coaches)? YES NO Respect in Sport Certificate #: _____

Sub Total Amount Requested: _____

Coaching Certification Registration Fee Reimbursement (Licensing Stream)

Please Indicate Course Taken...
 (* Note: Preapproval is required prior to registration for courses beyond the required standards)

C Licence	<input type="checkbox"/>	Hosted by: _____
B Licence *	<input type="checkbox"/>	Hosted by: _____
A Licence *	<input type="checkbox"/>	Hosted by: _____
Children's Licence *	<input type="checkbox"/>	Hosted by: _____
Youth Licence *	<input type="checkbox"/>	Hosted by: _____
GK Coach Diploma *	<input type="checkbox"/>	Hosted by: _____

For B Lic and Higher did you request pre-approval? YES NO

Course Dates (day/month/year) From: Day / Month / Year To: Day / Month / Year Course Fee Amount Inc HST: _____

Proof of Payment Receipt Enclosed? YES NO Proof of Completion The Locker Profile Transcript Enclosed? YES NO Other: _____

Have you applied for Sport NL Funding? (Sport NL funding available to cover up to 50% of course related fees) YES NO Funding Amount received: _____

Other Cost Description: _____	Amount: _____	Proof of Payment Receipt Enclosed? <input type="checkbox"/>
Other Cost Description: _____	Amount: _____	Proof of Payment Receipt Enclosed? <input type="checkbox"/>
Other Cost Description: _____	Amount: _____	Proof of Payment Receipt Enclosed? <input type="checkbox"/>

Please Indicate Which Installment You Are Requesting: First Installment (Year One) (50% of Approved Costs) Second Installment (Year Two) (Up to 50% less any alternate funding):

Have you completed, Making Headway & Making Ethical Decisions? YES NO Proof of Completion The Locker Profile Transcript Enclosed? YES

Have you completed Respect in Sport (Version for Coaches)? YES NO Respect in Sport Certificate #: _____

Sub Total Amount Requested: _____

First Aid / Respect in Sport Reimbursement

Please Indicate which reimbursement you are applying for;

Respect in Sport Completed Day / Month / Year Proof of Completion (Certi #): _____ **Course Fee:** _____

First Aid Completed Day / Month / Year Enclosed (copy of certificate): **Flat Rate Fee Reimbursement \$100**

Sub Total Amount Requested: _____

Coach Appreciation Award

Appreciation Awards for any given season can only be authorized after November 1st of the subsequent season and providing that the applicant is assigned to coach again in the subsequent season.

Have you completed, Making Headway & Making Ethical Decisions? YES NO Proof of Completion YES
 The Locker Profile Transcript Enclosed

Have you completed Respect in Sport (Version for Coaches)? YES NO Respect in Sport Certificate #: _____

Answer the following questions with respect to the season in question;

Commitment to Development: I met the required certification for the age group YES NO Confirm the Required Level: Eq. Fundamentals

Commitment to Development: I attended other workshops, clinics and/or seminars YES NO Provide Details: _____

Attendance: I was able to attend the majority (estimate 70% or more) of practices/games YES NO If no explain: _____

Fill out the applicable category.

<input type="checkbox"/>	I am a Student Coach requesting remuneration	<i>Do not have a child on the team they are coaching & "student" defined as currently attending Post-Secondary Education or graduated from post-secondary education within the last 1 year</i>			
Prior Season for Which Requesting Appreciation Award: <u>Eq 2017/18</u>		Team Coached: <u>eg BU11 Metro</u>			
Please Indicate when you started coaching during the above season		Fall Appointment (eligible for \$300): <input type="checkbox"/>	Spring Appointment (eligible for \$150): <input type="checkbox"/>	Sub Total Amount Requested:	

<input type="checkbox"/>	I am a Volunteer Coach requesting discounted fees	<i>Do not have a child on the team they are coaching but has children within the association playing for other teams than the one they are coaching, then the Club will award a discount per child up to a maximum discount as detailed below off their children(s) registration in the subsequent year</i>			
Prior Season for Which Requesting Appreciation Award: <u>Eq 2017/18</u>		Team Coached: <u>eg BU11 Metro</u>			
Please Indicate when you started coaching during the above season along with children you are requesting discounts for;	Fall Appointment (eligible for \$100 discount per child up to max \$300):	Child 1 <input type="checkbox"/>	Name:	\$100	Sub Total Discount Requested:
		Child 2 <input type="checkbox"/>	Name:	\$100	
		Child 3 <input type="checkbox"/>	Name:	\$100	
	Spring Appointment (eligible for \$50 discount per child up to max \$150):	Child 1 <input type="checkbox"/>	Name:	\$50	Sub Total Discount Requested:
		Child 2 <input type="checkbox"/>	Name:	\$50	
		Child 3 <input type="checkbox"/>	Name:	\$50	

<input type="checkbox"/>	I am a Parent Coach requesting discounted fees	<i>Any parent volunteering to help coach their own child's team will receive a discount of \$50 off that child's registration for the subsequent year after November 1st in the subsequent year</i>			
Prior Season for Which Requesting Appreciation Award: <u>Eq 2017/18</u>		Team Coached: <u>eg BU11 Metro</u>			
Child's Name	Discount amount \$50	Sub Total Discount Requested:			

Goal Keeper Staff Coach Award

Have you completed, Making Headway & Making Ethical Decisions? YES NO

Proof of Completion YES
The Locker Profile Transcript Enclosed

Have you completed Respect in Sport (Version for Coaches)? YES NO

Respect in Sport Certificate #: _____

Fill out the table below.

<input type="checkbox"/>	I am a GK Staff Coach requesting remuneration. <i>(Appointed annually by Paradise Soccer Club)</i>				
Start Date of Time Period for this request:	Day / Month / Year	End Date of Time Period for this request:	Day / Month / Year		
Please Indicate which Sessions you delivered along with the number of sessions and the associated amount and enter dates below.	Competitive GK Sessions <input type="checkbox"/>	# Sessions		@ \$30 per session	\$
	Development Team Sessions <input type="checkbox"/>	# Sessions		@ \$30 per session	\$
	GK Skills Programs <input type="checkbox"/>	# Sessions		@ \$30 per session	\$
	GK Coaching Clinics <input type="checkbox"/>	# Sessions		@ \$30 per session	\$
	GK Gameday Feedback <input type="checkbox"/>	# Sessions		@ \$30 per session	\$
				Sub Total Amount Requested:	

Dates of Competitive GK Sessions Day / Month / Year:

Dates of Development Team Sessions Day / Month / Year:

Dates of GK Skills Programs Day / Month / Year:

Dates of GK Coaching Clinics Day / Month / Year:

Dates of GK Gameday Feedback Day / Month / Year:

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in this application or may result in my release from coaching duties.

Signature: _____ Date: _____