

**COACH APPLICATION for the 2020-2021 Season**

**Westlock Minor Hockey**

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

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Certifications**: Please check all that apply.

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| --- | --- | --- |
| Check all that apply. | Certification | Year Completed |
| □ | Respect in Sport – Coach |  |
| □ | Coach 2 - Coach Level |  |
| □ | Development 1 |  |
| □ | High Performance 1 |  |
| □ | Instructional Stream – Checking Skills |  |
| □ | Hockey Canada Safety Program |  |

**If you have any other relevant certifications, please indicate below:**

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**Which division do you prefer to coach? (Please circle your choice.)**

 Initiation Novice Atom Pee Wee

 Bantam Midget

**Which position do you prefer? (Please circle your choice.)**

Head Coach Assistant Coach

**Please describe your coaching philosophy:**

**Previous Coaching Experience:**

Please email your coaching application to Vice President at westlockmhavp@gmail.com