|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **White Butte Storm Softball Coach Application** | | | | |  |  |
|  |  |  |  |
| Email application to: Shona Elder (Coaching Developer) at s.rosy@sasktel.net | | | | | |  |
|  |  |  |  |
| \*\*\*\*CRIMINAL RECORD CHECK\*\*\*\*\* will be required prior to the start of the season and can be | | | | | | |
| obtained at no charge through the White Butte RCMP detachment, in Emerald Park. | | | | | | |
| Copies will be at the detachment to fill out. CRC are good for 2 years. | | | | |  |  |

**NAME:**

**ADDRESS:**

**TOWN: POSTAL CODE:**

**HOME PHONE: WORK PHONE:**

**CELL PHONE: EMAIL:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Head or Assist Coach** | | **Division** |  | **If you do not have a child playing but wish to be associated with a team, list players name here:** | | | |
|  |  |  |  |  |  | |  |
|  |  | U7 |  |  |  |  |  |
|  |  | U9 |  |  |  |  |  |
|  |  | U11 |  |  |  |  |  |
|  |  | U13 |  |  |  |  |  |
|  |  | U15 |  |  |  |  |  |
|  |  | U17 |  |  |  |  |  |
|  |  | Ladies |  |  |  |  |  |

**Coaching Experience (number of years) –**

**Respect in Sport Number (required) –**

**Please list any coaching courses or accreditation (ie. Competition-Introduction- Trained or Level 1 Certified or Community Coach- Trained, Learn to Play Orientation) –**

**Coaching Philosophy –**

**If you have any questions or concerns please contact: Shona Elder at s.rosy@sasktel.net**