

# **Tavistock Minor Hockey Association**

## **Coaches Application 2011-2012**

In order to prepare for the upcoming 2011-2012 hockey season, it is important that the TDMHA have coaches for every team in place as soon as possible. Any team within the Association is available each year. Please complete and submit this application if you are interested in coaching or helping with a team next season. The TDMHA Coaches Committee reviews each application, interviews candidates as required, and makes recommendations to the Executive Committee.

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

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

**Telephone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**What level of coach certification do you presently hold?**

CHIP    D1    D2    Advanced    Other: Please Specify : \_\_\_\_\_

**OMHA Certification #** \_\_\_\_\_

**Coaches Card Expiry Date:** \_\_\_\_\_

**Trainer's Card Expiry Date:** \_\_\_\_\_

**Do you have your PRS Certification**    Yes    No

**I wish to apply for the following: (check one age level, one category and one position only)**

**Age Level**

Pre Novice    Bantam  
 Novice    Midget  
 Atom    Juvenile  
 Peewee

**Category**

Local League  
 Additional Entry  
 Rep

**Position**

Coach  
 Assistant Coach  
 Trainer  
 Manager

If you are not selected for your 1<sup>st</sup> choice would you consider applying for another team?

Yes    No

If yes: \_\_\_\_\_  
Team   Level   Position

Will you have a child trying out for this team?    Yes    No

If yes, is this application dependent upon which team your child plays for?    Yes    No

**List your two most recent coaching positions:**

Year: \_\_\_\_\_   Team: \_\_\_\_\_   Position: \_\_\_\_\_

Year: \_\_\_\_\_   Team: \_\_\_\_\_   Position: \_\_\_\_\_

**Signature:** \_\_\_\_\_   **Date:** \_\_\_\_\_

**Notes:**

- 1) All positions are open for application each year. You must apply even if you are requesting the same team.
- 2) Application deadline is **Friday June 17, 2011** (Minor Hockey AGM). Applications may be given **to Arnie Schwartztruber** or mailed to: **TDMHA, P.O. Box 923, Tavistock, Ont. N0B 2R0.**
- 3) **Please include a listing, outlining your coaching experience & hockey background.**

