



FRASER VALLEY RINGETTE ASSOCIATION

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COACHING AND TEAM STAFF APPLICATION FORM

(PLEASE PRINT OR COMPLETE ELECTRONICALLY)

NAME: _____ **DATE OF BIRTH:** _____

ADDRESS: _____

PHONE: _____ **CELL:** _____ **WORK:** _____

EMAIL: _____

MEDICAL NUMBER: _____

COACHING CERTIFICATION NUMBER/NCCP #: _____

POSITION APPLYING FOR: _____

HEAD COACH - ASSISTANT COACH - MANAGER - TRAINER - TEAM PARENT

TEAM - 1ST CHOICE

DIVISION: _____ **LEVEL (A,B,C):** _____

TEAM - 2ND CHOICE

DIVISION: _____ **LEVEL (A,B,C):** _____

OTHER CERTIFICATION (ATTACH PHOTOCOPY OF CERTIFICATION) :

PREVENTION IN MOTION: _____ **MANAGER'S CERTIFICATION:** _____

MORE THAN JUST A GAME: _____ **FIRST AID CERTIFICATION:** _____

SPEAK OUT(TAKEN AFTER 2006): _____ **REFEREE'S CERTIFICATION:** _____

PREVIOUS COACHING EXPERIENCE:

I HAVE READ AND AGREE TO ABIDE BY THE GUIDELINES OF THE BCRA COACHES CODE OF CONDUCT. I AM WILLING TO TAKE ALL COACHING COURSES REQUIRED BY BCRA TO MAINTAIN THE TEAM STAFF POSITION I HAVE APPLIED FOR. I AGREE TO INFORM FRASER VALLEY RINGETTE ASSOCIATION DIRECTOR OF COACHING OF ANY CHANGES TO MY PERSONAL INFORMATION OR QUALIFICATIONS. I AGREE TO FILE A CRIMINAL RECORD CHECK WITH THE FRASER VALLEY RINGETTE PRESIDENT AND DIRECTOR OF COACHING EACH SEASON.

SIGNATURE: _____ **DATE:** _____