



Coaching Application 2009-2010

Name: _____

Address: _____

Phone: Home _____ Office _____ Cellular _____

E-mail: _____ / _____

Team applying for: _____

Do you have a son/daughter playing at this level? Yes No

If so, would you accept this team if he/she did not make the team? Yes No

Coaching courses

Intermediate level Advanced level Speak Out! CC _____

Trainer level 1 Trainer level 2 Trainer level 3 TD000 _____

Previous coaching experience

References (all references will be checked)

Support material

Please attach any information you feel is relevant to your application. Include here any particular successes you have had as a coach, your philosophy, your knowledge of this team, what you would expect to teach your team this season, and a valid returned PRC form.

*Deadline for applications is **March 31, 2009**.*

Applications should be sent to: Director of Coaching
Ottawa Sting Minor Hockey Association
2641 Traverse Dr. Ottawa, Ontario K1V 8B4
or
EMAIL to: coaching@ottawasting.com