



# 3C's Minor Hockey Association Coach Application

Name: \_\_\_\_\_ D.O.B. (MM/DD/YYYY): \_\_\_\_\_

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

Phone#: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Coach ID #: \_\_\_\_\_

Preferred Coaching Assignment			
	Tier	H/C	Assist.
IP			
Novice			
Atom			
PW			
Bantam			
Midget			

Certification / Training	
Introduction to Coaching	_____
NCCP Coach Level	_____
NCCP Development I	_____
NCCP Development II	_____
Safety	_____
Respect in Sport	_____
Checking	_____

*Coaches please note...All proper certification for ALL levels must be completed prior to December 31 of the current hockey season. NO EXCEPTIONS! Hockey Alberta will reprimand those Teams that have deficiencies after December 31. All Team Personnel are required to have a Criminal Record/Vulnerable Sector Check.*

COACHING EXPERIENCE		
YEAR	POSITION	DIVISION
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### References

Name	Relationship	Phone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_