

CARBERRY MINOR HOCKEY ASSOCIATION

COACH / MANAGER APPLICATION

Last Name: _____ First Name: _____
D.O.B. _____ Phone (h): _____
Email: _____ Phone (w): _____
Address: _____ Postal Code: _____

HOCKEY CANADA CERTIFICATION LEVEL

(CHECK ALL THAT ARE APPLICABLE)

_____	INITIATION	_____	H.P. (ADVANCED I)
_____	COACH	_____	H.P. (ADVANCED II)
_____	INTERMEDIATE (DEV. 1)	_____	SAFETY
_____	INTERMEDIATE (DEV. II)	_____	RESPECT IN SPORT

Do you have children participating in the CMHA program? _____

Previous Coaching Experience (if other than CMHA, please provide past associations registered with and a contact for the association) :

Why would you be the best candidate for the coaching position?

Applying for Division: _____

Signature: _____ Date: _____

CMHA requires that all team officials provide a recent copy of a criminal records / vulnerable sector query which can be obtained at no cost from the local RCMP Detachment. This information must be provided to CMHA by October 1. A Child Abuse Registry check is also required through Manitoba Child & Family Services. CMHA will cover the cost of this request.