



HOCKEY ACADEMY OF HOUSTON

Volunteer Youth Hockey Coach Application

Please fill this out as completely as possible. All applicants must fill out a form regardless of past applications.

Personal Information

Last Name:		First Name:	
Address:			
City:		State:	Zip:
Phone: Home	Work	Cell	Other ()
Phone: Home	Work	Cell	Other ()
Phone: Home	Work	Cell	Other ()
Email:			

Position

Division (Please Circle Your Choice(s))

Mite / Squirt / PW /Bantam / JV /Midget

Position

Head / Assistant / Both

Level

Travel / Met

Coaching Experience

USA Hockey Certification: Yes No If Yes, Level: _____ Year _____

Other Coaching History:

Sport	Association	Level

Hockey Experience

List any Playing Experience: _____

By submitting this application I understand that if I violate any of the standards set forth by the Hockey Academy of Houston Board of Directors I may be subject to immediate suspension or dismissal as a coach for Hockey Academy of Houston. I further understand that coaching is a privilege and not a right, and I may be dismissed without cause.

Signature: _____ Date: _____