

TWIN VALLEY YOUTH HOCKEY COACHING APPLICATION

Twin Valley Youth Hockey Association requires that any person wishing to be appointed as a TVYHA Coach complete a Coaching Application - to be reviewed and approved by the Coaching Selection Committee. In accordance with NH Amateur Hockey guidelines, coaches (head and assistants) are required to obtain the required level of certification through the USA Hockey Coaching Achievement Program. In addition, each coach will be required to comply with screening procedures of NHAHA prior to assuming any coaching duties with TVYHA.

NAME: _____ HOME PHONE: _____

ADDRESS: _____ WORK PHONE: _____

CITY: _____ STATE: _____ ZIP: _____ CELL PHONE: _____

E-MAIL: _____

USA HOCKEY CEP# _____ LEVEL: ____ MODULE Completed: _____ EXPIRES: _____

HAVE YOU BEEN NHAHA BACKGROUND CHECKED? ____ YES ____ NO Year of screening: _____

TEAM INFORMATION:

PLEASE INDICATE TEAM CHOICES BASED ON THE TEAM YOU ARE WILLING TO COACH FIRST:

DESIRED AGE LEVEL/TEAM – 1ST CHOICE: _____

DESIRED AGE LEVEL/TEAM – 2ND CHOICE: _____

____ HEAD or ____ ASSISTANT COMMENTS: _____

DO YOU HAVE A CHILD IN OUR PROGRAM: ____ YES ____ NO

DIVISION: _____ TEAM: _____

COACHING EXPERIENCE:

List Association, Division, GSL Tier, Head or Assistant, and if you had your child on that team

REFERENCES:

NAME: _____ ADDRESS: _____ STATE: _____ ZIP: _____ PHONE: _____

NAME: _____ ADDRESS: _____ STATE: _____ ZIP: _____ PHONE: _____

PRIOR PLAYING EXPERIENCE:

Detail prior experience in Travel, High School, Jr.'s, College, and Professional.

Thank you for your interest in volunteering! Send completed forms to:

**Twin Valley Youth Hockey Association, Inc.
Coaching Selection Committee
P.O. Box 184
Meriden, NH 03770**