

**DURANGO AREA YOUTH HOCKEY ASSOCIATION (DAYHA) COACHING APPLICATION**

In an effort to better prepare coaches, parents and athletes for future hockey seasons, the DAYHA Board requires that all prospective coaches to complete this application. Applications will be reviewed and discussed by the Board. Please complete and submit your application to the DAYHA President or any DAYHA Board member.

**Name:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Current coaching certification level:** \_\_\_\_\_ **No.** \_\_\_\_\_

**Years of coaching experience (hockey and non-hockey).**

*Please include details about what sports have coached, for what age level and what gender.*

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**Why are you interested in coaching youth hockey?**

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**What do you think you can bring to DAYHA as a coach?**

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**Beyond the mandatory USA Hockey certification program, would you be interested in participating in additional coaching education? If yes, what type of continued education would you be interested in?**

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**DAYHA follows the American Development Model (ADM). Are you agreeable to coaching ADM?**

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**Have you ever been convicted of a felony? If yes, please explain:**

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**Applicant signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_