

2019-20 AYHA COACHING APPLICATION

Thank you for your interest in joining the roster of coaches, assistant coaches, and on-ice volunteers for the Adrian Youth Hockey Association. Please complete the following form and submit via email to AYHA Coaching Coordinator Brett White ([sgt\_forward@hotmail.com](mailto:sgt_forward@hotmail.com)). Upon a completed review of submissions, the AYHA Coaching Coordinator presents to the Executive Board of Directors a list of recommendations prior to the Annual Meeting (August). Successful candidates are then informed and must complete all required USA Hockey and MAHA processes before their required deadlines. All AYHA coaches, assistant coaches, and on-ice volunteers are expected to perform these functions for any and all levels of the Associations as needed and to the best of their abilities.

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE SELECT WHICH POSITION YOU ARE APPLYING TO COACH/ASSIST:

\_\_\_\_\_\_\_\_\_­ HEAD COACH \_\_\_\_\_\_\_\_\_\_\_ ASSISTANT COACH

WHAT AGE LEVEL/DIVISION ARE YOU APPLYING TO COACH/ASSIST:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

USA HOCKEY COACHING CERTIFICATION #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CERTIFICATION LEVEL AND EXPIRATION YEAR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PLEASE LIST ALL PREVIOUS COACHING EXPERIENCE AND WHY YOU WOULD LIKE TO COACH AT AYHA:

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