

GFYHA Coaching Structure:

- GFYHA will provide compensation for two (2) coaches per team.
 - Reimbursement of parent coaches will be in the amount of registration at the level being coached. Head coaches can request this amount be divided more than two ways. The total amount from GFYHA will reflect that of two (2) registrations at the level being coached.
- If head coaches request additional (more than two) coaches rostered: GFYHA will reimburse the additional coach for USA Hockey Registration, CEP Courses, USA Hockey Level Modules, and cleared Background checks.
- Non Parent coaches will be paid mileage.
- Non Parent coaches will be reimbursed for motel/lodging. Reimbursement will be made for one room per team per trip.

Head Coach:

Parent: Player fee reimbursement for the level they are coaching.
 Dibs for all players of the family.

Non-Parent: \$2000/season
 Hotels for tournaments and approved travel weekends.

Assistant Coach:

Parent: Player fee reimbursement for the level they are coaching.
 Dibs for all players of the family.

Non Parent: \$1500/season
 Hotels for tournaments and approved travel weekends.

Coaches are required to complete and submit the following:

1. USA Hockey # (9 numbers, followed by the last 5 letters of last name)
2. Safe Sport Certificate
3. Background Check
4. Age specific Modules
5. Coaching CEP

Please email verification of these items to jclose@gfyha.com along with receipts for reimbursement

Grand Forks Youth Hockey Association
Coach Compensation
2022-2023 Season

All compensation to coaches will be processed through payroll.

The following forms must be completed and submitted to GFYH prior to payment for coaching services:

W-4

Complete this form in its entirety ensuring that Step 1 and Step 5 are completed, along with the remainder of the document as it applies to you. If you are unsure how to complete Step 2, 3 or 4, we suggest you consult a tax professional.

I-9

Complete Section 1 in its entirety as it applies to you. Be sure to include proper identification as indicated on page 3 (entitled "LISTS OF ACCEPTABLE DOCUMENTS").

Note that you must provide a copy of:

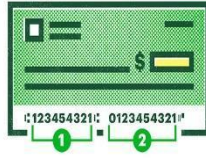
- ONE of the documents in List A **OR**
- ONE item from List B **AND** one item from List C

Employee Direct Deposit Authorization

Complete PAYCHEX Direct Deposit Enrollment Form.

- Name
- Type of Account
- Account Holder's Name
- Routing/Transit Number (See below - #1)
- Checking Account Number (See below - #2)
- Financial Institution

- Signature and Date



Please attach a voided check to this authorization.