



**2011 / 2012
Gloucester Centre House League
Coaches Application Form**

Name: _____

Address: _____

Postal Code: _____

Phone: _____ Home: _____

Work: _____

E-mail address: _____

Do you have time to commit fully? Yes _____ No _____

Have you taken Speak Out? Yes _____ No _____

Speak Out certification is required to volunteer in any capacity (coach, manager, etc)

Are you a CAHA Certified Coach? Yes _____ No _____

If **YES**, indicate level:

Initiation _____ Coach _____ Intermediate _____ Advanced _____

If NO, you must be willing to complete ODMHA required courses.

Please Note: Initiation Level is required to coach Initiation. Coach Level Certification is required for Novice and up.

The Association will refund successful candidates who complete the required courses.

Please checkmark your choice (enter 1st, 2nd to prioritize more than one choice)

Group	Age	C	B	A
Initiation	5-6	___ (Beg)	___ (Int)	___ (Adv)
Novice	7-8	___	___	___
Atom	9-10	___	___	___
Peewee	11-12	___	___	___
Bantam	13-14	___	___	N/A
Midget	15-17	___	___	N/A

Please list your pass Volunteer experience with any organization involving children.

Hockey:

Other:



**2011 / 2012
Gloucester Centre House League
Coaches Application Form**

Please list three (3) references so that we can verify your volunteer experience.

Name	Phone #	Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Any Additional Information?

I am aware that the primary aim of the Gloucester Centre Minor Hockey Association is the **personal enjoyment** and **character development** of each individual participant and as such winning is a secondary achievement; that each participant in my charge will be given equal opportunity and consideration; the actions of all coaches and his/her staff during every contest shall be exemplary. I agree that any behavior on my part or my staff that is contrary to the above aims could forfeit my coaching privileges.

Before being accepted as a coaching candidate you must agree to the following terms and conditions:

- A. Accept full responsibility for the team on-ice conduct, finances, team officials, etc.
- B. Operates within the guidelines of GHA Fair Play rules (no power plays & penalty killing, Fair Ice time, proper code of conduct, etc)
- C. Have your players and/or parents evaluate your season's performance.
- D. Have a pre-season's parents meeting with your level convenor in attendance.
- E. Complete a Police Record Check form (see forms on GCMHA website and include 2 pieces of IDs, at least 1 with picture) and attend a Speak Out session.
- F. Agree to verification on any information provided on this application form.

APPLICANT'S SIGNATURE

DATE

Once this form is filled out you can e-mail to: Tim@TimTierney.ca

or print and mail to:

**GCMHA
PO Box 46131
RPO Beacon Hill
2339 Ogilvie Road
Ottawa, ON K1J 9M7**