RED WING AMATUER HOCKEY ASSOCIATION

HEAD COACH & ASSISTANT COACHES APPLICATION FORM

Please hand these to an RWAHA Board Member or email to admin@redwinghockey.org

Please print all information clearly:		
Coach's Name:	E-mail Address:	
Address:	Home Phone:	
City/State:	Cell Phone:	
Zip Code:	Driver's License #:	
Explain why you want to be a coach:		
Explain what level you want to coach at and why:		
Head coach or assistant coach?		
Do you have children playing in RWAHA?		
If so, what level?		
Are you willing to coach a different team besides the one that your c	:hild is on?	
USA Hockey requires a background check. Have you been convicted of	of a felony in the past 7 years?	
List your coaching experience, playing experience, training, and back	ground:	
Coaching Certification: (coaches are required to become certified by	December 31 st of the season)	
Level: Date obtaine	ed: CEP #:	
References: Please list two references along with how to contact the	em.	
Name:	Ph #:	_
Name:	Ph #:	_
I certify that the information I have provided is true and correct to the	ne best of my knowledge.	
Signature		

It is critical that RWAHA maintains the safety of all youth in our program. To that end, RWAHA follows the USA Hockey requirements for background checks.