



# Thunder Bay ELKS Hockey Association Coaching Application



Fill in the editable PDF, save the file using your name & email the saved copy to us:

Name: \_\_\_\_\_  
(Given name) (Middle) (Surname)

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Cell: \_\_\_\_\_ FAX: \_\_\_\_\_

Email Address: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employers Phone: \_\_\_\_\_ Address: \_\_\_\_\_

## Coaching Assignment Requested

Select ONE only. The form uses a single-choice radio group so only one assignment can be selected.

- U7:**            Select
- U9:**            Select
- U11:**          AA            A1            A2
- U13:**          AA            A1            A2
- U15:**          AA            A1            A2
- U18:**          AA            A1            A2

## Certification / Training \* Hockey Canada Coach Training

	Year completed	Location
Coach Development 1 (Head Coach AA only)		
Coach 2 (Head Coach all A Teams)		
Trainers Certification		
Hockey Canada Checking Skills Clinic		
Coach 1 - Intro to Coach (Minimum requirement for IP & Novice)		
Respect in Sport (RIS) / Speak Out - required!		
Criminal Records Check - required!		
Gender Identity - required!		

Hockey Canada ID #: \_\_\_\_\_



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## Other Coaching Courses or Training

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## Hockey Coaching Experience

(List in order, starting with the most recent)

Year	Association and Team Name	Age Group	Position

## Other Sports

Year	Association	Sport	Position

## Coaching Staff (assistant coaches, trainer, manager, special events co-ordinator etc)

Year	Name	Age Group	Position



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## Briefly describe your Coaching Philosophy

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have a child registered with SNMHA/TBMHA?	Yes	No
If a Coaching Position were not available in the age group of your choice, would you be willing to coach in another division or help out with skill clinics?	Yes	No
Will you coach the team if an independent committee does not assess your child to make the team? (AA TEAMS ONLY)	Yes	No
Are you certified for the level for which you are applying?	Yes	No
If you are not certified at the required level, are you available to take a weekend course to attain the required level? (If Yes, which division?) _____	Yes	No

## Coaching References: (minimum of 2)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Association and Position: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Association and Position: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Association and Position: \_\_\_\_\_



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## Role Preference

Head Coach

Assistant Coach

Either

## Availability (Sept-April)

Full Season	Yes	No
Weeknight Practices	Yes	No
Weekend Games	Yes	No
Travel	Yes	No

## Parent / Player Declaration

Yes

No

Player Name: \_\_\_\_\_

## Staff Preferences

Preferred Assistants: \_\_\_\_\_

## Discipline Declaration

Yes

No

If yes, explain:

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## Undertaking

1. I hereby consent to disclosure of the above information.
2. I hereby acknowledge the authority of the Thunder Bay Elks Hockey Association and agree to carry out and abide by their constitution, bylaws, rules and regulations.
3. I hereby acknowledge that I have read and understand the coach's role as outlined in the Team Officials Contract attached to and forming part of this Coaching Application form.
4. I hereby agree to familiarize myself with the Hockey Canada Certification Program requirements for coaching minor hockey and ensure that I maintain the required level of certification.
5. Incomplete applications will NOT be considered.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **Please submit your application:**

By email: [president@elks82s.com](mailto:president@elks82s.com)

By mail: Box 28082, 900 Arthur Street E., Thunder Bay, ON, P7E 6R5

**NOTE: Please sign the copy of the Team Officials Contract**

### **General Comments:**

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## Team Official's Contract

It is the intention of this Contract to promote fair play and respect for all participants within the Association. All coaches must sign this Contract before being allowed to participate in hockey and must continue to observe the principles of Fair Play.

### Fair Play Code

I will be reasonable when scheduling games and practices remembering that young athletes have other interests and obligations.

I will teach my players to play fair and to respect the Rules, Officials, Opponents and Teammates.

I will ensure all players receive equal instruction, discipline, support and appropriate fair play time.

I will not ridicule or yell at my players for making mistakes or for performing poorly. I will remember that children play to have fun and must be encouraged to have confidence in themselves.

I will make sure that equipment and facilities are safe and match the players' ages and ability.

I will remember players need a coach they can respect. I will be generous with praise and set a good example.

I will obtain proper training and continue to upgrade my coaching skills.

I agree to abide by the principles of the fair play code as set by Hockey Canada and supported by Thunder Bay Elks Hockey Association.

I also agree to abide by the Rules, Regulations and Decisions as set by Thunder Bay Elks Hockey Association.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_