



VOLUNTEER COACHING APPLICATION FORM

Name: _____

Address: _____

Phone (Home): _____ Cell: _____

Email: _____

COACHING INTERESTS:

I would like to apply for the position of: _____ Head Coach _____ Assistant Coach

Age group(s) you are applying for: _____

Child's name and division (if applicable): _____

COACHING QUALIFICATIONS:

Do you have any certifications/experience/qualities that would help you to be a good coach?

By completing and signing this application, you agree to the terms and conditions of coaching for the Brockville Soccer Club and agree to provide a CPIC clearance prior to accepting a coaching position.

Signature: _____ Date: _____