



AMERY YOUTH HOCKEY ASSOCIATION

COACHING APPLICATION FOR THE 2021-2022 SEASON

APPLICATION DEADLINE: **2nd Wednesday in August (August 11, 2021)**

SECTION 1: CONTACT INFORMATION

Name of Applicant: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ Birth Date: _____

(Emergencies Only)

(yyyy/mm/dd)

Email Address: _____

Home Address: _____

City: _____ Postal Code: _____

SECTION 2: TEAM APPLICATION

I wish to apply as **Head Coach** for the following team:

- Mini-Mites Beginners
- Mites Level 2-4
- Squirts
- Peewee
- Bantam

Would you be willing to be an assistant coach? Yes No (if yes, which level)

- Mini-Mites Beginners
- Mites Level 2-4
- Squirts
- Peewee
- Bantam

Would you be willing to coach a team that you did not apply for? Yes No

List below any people you are considering for part of your coaching staff:

<i>Name</i>	<i>Position</i>

Coach Selection Policy - Passed 7/19/2017
Amended 10/16/2019, 6/16/2021

SECTION 3: EXPERIENCE/QUALIFICATIONS

Please provide details of prior coaching positions held:

Year: _____ Association: _____ Position: _____

Year: _____ Association: _____ Position: _____

Year: _____ Association: _____ Position: _____

SECTION 4: REFERENCES

Coaching:

Name: _____ Phone: _____

Non-Coaching:

Name: _____ Phone: _____

I acknowledge and agree to the above-named references being contacted. I am aware that other persons and organizations may also be contacted. I give permission to these persons/organizations to provide information about myself to the Amery Youth Hockey Association (AYHA) for purposes of this application.

If accepted to a coaching position with AYHA, I agree to uphold and abide by any rules and regulations as set forth by the USA Hockey, WAHA and the goals or philosophies of the Association.

I further understand and agree that as Head Coach I bear ultimate responsibility for any and all team staff conduct or lack of performance in their duties. It is also understood that all signing parties are subject to discipline or suspension at the AYHA Board of Directors discretion.

I AGREE to all terms and conditions.

Printed Name: _____ Signature: _____

Please return application, Letter of Intent and biography by Wednesday, August 11, 2021

to the AYHA Board Secretary at davamanning@gmail.com

Thank you for taking time to apply with Amery Youth Hockey Association