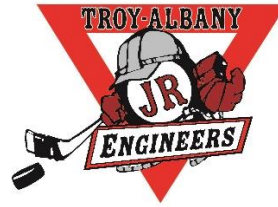


TROY ALBANY HOCKEY ASSOCIATION



COACHING APPLICATION

Individuals interested in coaching during the 2019-2020 season are required to complete this application, and all other requirements of the coaching selection process. If selected, you will be required to obtain the necessary USA Hockey and New York State Amateur Hockey Association Coaching Certifications AND attend all TAHA coaching clinics. If you have any questions, please contact the Coaching Coordinator Walt Peretti (tahaadmcoordinator@gmail.com).

Name: _____

Address: _____

Phone: _____ Email(s): _____

Coaching Level Last Season: _____

Association: _____

Past Coaching Experience:

Position _____ Level _____ Organization _____ Year _____

Position _____ Level _____ Organization _____ Year _____

Position _____ Level _____ Organization _____ Year _____

Position _____ Level _____ Organization _____ Year _____

Please provide an attachment with additional coaching experience if needed.

The following five items must be completed prior to the start of the 2019-2020 TAHA Ice Hockey Season, and I understand they are required per New York State Amateur Hockey Association and USA Hockey.

1. USA Hockey Registration
2. Safe Sport Certification
3. New York State Criminal Background Screening
4. Coaching Education Program Up to Date
5. Age Appropriate Module Complete

I understand that I may roster no more than eighteen (18) skaters and two (2) goalies for my team. I will not select players outside the tryout schedule without express, written consent from the Troy Albany Hockey Association Board of Directors.

I understand that no one shall skate on my team's practice ice or my team's game ice unless they are rostered with Troy Albany Hockey Association. This rule applies to siblings, high school students, or other guests.

I understand that I am responsible for all Assistant Coaches, Team Managers, and Team Volunteers. I must insure they are properly registered with USA Hockey, have obtained Safe Sport Certification, have completed their New York State Criminal Background Screening, are current with their Coaching Education Program Level, and have completed their Age Appropriate Module.

I understand that any violation of Troy Albany Hockey Association Policies or By-Laws, New York State Amateur Hockey Association Rules, or USA Hockey Rules may be grounds for immediate dismissal from Troy Albany Hockey Association.

The TAHA Registrar and TAHA President shall agree that there are no outstanding items and my roster has been approved with no redlines from USA Hockey to be compensated for coaching. My compensation shall be no less than 50% of the skater registration fee for the team I am coaching.

Signature: _____ **Date:** _____

Print Name: _____

Position Applying For (Circle): HEAD COACH ASSISTANT COACH
Program Applying For (Circle): TITANS JR. ENGINEERS ICE CATS
Age Level (Circle): 8U (MITES) 10U (SQUIRTS) 12U (PEEWEEES/ICE CATS)
14U (BANTAMS/ICE CATS) 15Y (MIDGETS) 16U (MIDGETS/ICE CATS)
18U (MIDGETS) 19U (ICE CATS)
Skill Level (Circle): MAJOR MINOR A B C ADVANCED CROSS ICE MITES

Please provide an attachment that describes your coaching philosophy for the age level(s) which you are applying.

Your Experience Playing Organized Hockey (Check All That Apply):

- None
- Youth – Location: _____
- High School / Prep – Location: _____
- Junior Hockey – Location: _____
- College Hockey – Location: _____
- Post College Hockey – Location: _____

Do You Currently Have Children Playing Hockey?

- Yes - Levels: _____
- No

Provide Two References to Confirm Your Coaching Experience

Name: _____ **Phone #:** _____

Name: _____ **Phone #:** _____

Mail completed form to:

Troy-Albany Youth Hockey
2030 Fairlawn Parkway
Niskayuna, NY 12309

Email it to: info@troyalbanyyouthhockey.com