



Sooke Soccer Club Coaching Application Form

Name:		Phone:
Address:		Email:
		Other Contact#:
Team Applying for:		
If this team is not available, are you willing to coach another? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Coaching Qualifications:	<input type="checkbox"/> Grassroots	<input type="checkbox"/> CC Youth <input type="checkbox"/> B Prep License
Certification Mandatory (applicable to age group)	<input type="checkbox"/> CCC	<input type="checkbox"/> CC Senior <input type="checkbox"/> B License

Coaching Experience, Playing Experience, Other Sports in both Youth & Senior
(Feel free to include a resume and/or other supporting documents)

Coaching Experience/Teams:

Playing Experience/Teams:

What is your primary motivation for wanting to coach:

What is your general coaching philosophy:

What are your expectations regarding support from the club:

References

Name Reference 1:	Telephone:	Email:
Name Reference 2:	Telephone:	Email:

Have you filled out a Risk Management Form? Yes No

I agree to coach within the bylaws, guidelines and policies established by the Sooke Soccer Club.

SIGNATURE:

DATE

For Office Use Only

Risk Management Form Completed?

Approved – Technical Committee / Executive

Comments: