



## SURREY STORM FASTPITCH APPLICATION TO COACH OR MANAGE

Application to Coach  Application to Manage  Division applying for \_\_\_\_\_

Name: \_\_\_\_\_ Phone \_\_\_\_\_  
Home cell work

Address: \_\_\_\_\_  
House number street city postal code

Previous coaching experience: (list most recent first)

If you have been a Head Coach with Storm for the previous 2 or more years you need only fill in #1 below

1. Year(s) \_\_\_\_\_ Association: \_\_\_\_\_ Contact: \_\_\_\_\_ Ph#: \_\_\_\_\_  
Division(s) coached \_\_\_\_\_

2. Year(s) \_\_\_\_\_ Association: \_\_\_\_\_ Contact: \_\_\_\_\_ Ph#: \_\_\_\_\_  
Division(s) coached: \_\_\_\_\_

3. Year(s) \_\_\_\_\_ Association: \_\_\_\_\_ Contact: \_\_\_\_\_ Ph#: \_\_\_\_\_  
Division(s) coached: \_\_\_\_\_

(LIST ADDITIONAL EXPERIENCE ON THE BACK OF THIS FORM)

NCCP Coaching level \_\_\_\_\_ Passport Number \_\_\_\_\_

Coaching Clinics, Conferences, Sport First Aid Courses attended or completed

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

(LIST ADDITIONAL COURSES ON THE BACK OF THIS FORM)

Personal References:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

(INCLUDE NAME, ADDRESS & PHONE NUMBER )

Reason(s) for wanting to

Coach/Manage: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have read the Storm Player/Coaches selection method and will abide by same: \_\_\_\_\_ (initial)

I have read the Storm Code of ethics and will abide by same: \_\_\_\_\_ (initial)

I will attend all clinics to obtain my NCCP level necessary: \_\_\_\_\_ (initial)

\_\_\_\_\_  
(signature) (date)

Fax application to: (604) 676-2827 or Mail to: Surrey Storm Fastpitch, P.O.Box 35022,  
Fleetwood P.O., Surrey, BC, V3S 9E9

**Deadline August 16th 2008!**