



HOCKEY CANADA SAFETY PERSON (HCSP) formally TRAINER APPLICATION FORM

The Volunteer program and positions will be attended to in the Fall at the Team level.
The positions that we require to have in place and properly qualified early is:
HCSP – Hockey Canada Safety Person (Valid Certificate – good for 6 yrs)
Head Coach & Assistant Coach (require Dev 1) for Atom Dev & Peewee / Bantam / Midget Rep.

HCSP requirements: Age 19+, must undergo RCMP Criminal Record Check.
If you don't have HCSP you must be willing to take Respect in Sport or have Speak Out and take HCSP clinic.
Good communication skills, reliable, organized and dedicated.

NAME: _____

ADDRESS: _____ POSTAL CODE _____

PHONE: _____ CEL PHONE: _____

EMAIL ADDRESS _____

PREVIOUS TEAMS HCSP (Trainer) for: _____

MARK WITH X DIVISION OF INTEREST:

- INITIATION (5 & 6) YRS OLD _____
- NOVICE (7 & 8) YRS OLD _____
- ATOM (9 & 10) YRS OLD _____
- ATOM DEVELOPMENT (9 & 10) YRS OLD _____
- PEEWEE (11&12 YRS OLD) _____ REP? YES ___ NO ___
- BANTAM (13&14 YRS OLD) _____ REP? YES ___ NO ___
- MIDGET (15,16,17 YRS OLD) _____ REP? YES ___ NO ___

CURRENT QUALIFICATIONS: MAY HAVE TO PROVIDE A PHOTOCOPY OF CERTIFICATE IF REQUIRED.
ANYONE ATTENDING **NEW CLINICS** – PHOTOCOPY OF CERTIFICATE MUST BE FORWARDED TO ADMINISTRATOR.

- SPEAK OUT or RESPECT in Sport _____ ADVANCED 1 _____
- INITIATION _____ ADVANCED 2 / LEVEL IV _____
- COACH LEVEL _____ COACH STREAM _____
- INTERMEDIATE _____ DEVELOPMENT STREAM 1&2 _____
- HCSP – TRAINERS (VALID FOR 6 YRS) _____ HIGH PERFORMANCE STREAM 1&2 _____

Thank you for completing this Application Form. Our intention is to have the Rep and Atom Development Coaches & HCSP (Trainers) in place early to allow them time to prepare for the upcoming season. All House/Rec. Coaches will be appointed shortly thereafter.

Signature _____

Date _____

To ensure your application will be considered please forward your completed application to WDMHA Administrator via Fax 250-766-0079