



## TEAM MANAGER - 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:

Team Manager (require Speakout)

HCSP – Hockey Canada Safety Person (Valid Certificate 3 yrs)

Head Coach & Assistant Coach (require Dev 1) for Atom Dev & Pee wee / Bantam / Midget Rep.

**Team Manager: Age 19+, must undergo RCMP Criminal Record Check. willing to take Speak Out Training (no cost to applicant). Good communication skills, reliable, organized and dedicated.**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PREVIOUS TEAM(S) MANAGER for: \_\_\_\_\_

MARK WITH X DIVISION(S) 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	_____	ADVANCED 1	_____
INITIATION	_____	ADVANCED 2 / LEVEL IV	_____
COACH LEVEL	_____	COACH STREAM	_____
INTERMEDIATE	_____	DEVELOPMENT STREAM 1&2	_____
HCSP – TRAINERS (VALID FOR 3 YRS)	_____	HIGH PERFORMANCE STREAM 1&2	_____

Thank you for completing this Application Form. Our intention is to have the Rep and Atom Development Coaches, Managers & 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**