



# 2009 OUTDOOR ALLSTAR COACH APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ P/C: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

If you have a current York Regional Police **VULNERABLE SECTOR SCREENING** Report please check here:

## AGE GROUP YOU WISH TO COACH IN 2009

- Mini (U8, U9 or U10)    Boys     Girls     Specify age group: \_\_\_\_\_
- Youth (U11-U18)    Boys     Girls     Specify age group: \_\_\_\_\_

Do you have a child/youth playing that you want to link to your application?    Yes     No

If yes, please provide the child's/youth's **COMPLETE** name here: \_\_\_\_\_

## PREVIOUS RELEVANT EXPERIENCE

Club registered with in 2008     Newmarket     Other \_\_\_\_\_

Team Coached in 2008: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## COMMUNITY COACH CERTIFICATION

Recognized Level Completed:     Youth 2     Senior

Last Certification Date:    Year \_\_\_\_\_    Month \_\_\_\_\_    Day \_\_\_\_\_

*Please contact the Technical Director for more information about in-house and certification coaching clinics.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NEWMARKET SOCCER CLUB ■ 26 WILSTEAD DRIVE ■ NEWMARKET ■ ON ■ L3Y 4T9**  
**TEL: 905.836.8761 ■ FAX: 905.836.9473 ■ WWW.NEWMARKETSOCCER.COM**