



AMERICAN CUESPORTS ALLIANCE

INSTRUCTOR/COACH CERTIFICATION APPLICATION

- PLEASE PRINT CLEARLY -

Name: _____

Address: _____

City: _____ State/Prov: _____ Zip/PC: _____ Country: _____

Hm. _____ Cell _____ Wk. _____

Tel: _____ Tel: _____ Tel: _____ Email: _____

Current/ expired: _____

For what level are you applying within the ACS Instructor/Coach program:

- a. Level 1 (\$35) _____ Comments: _____
- b. Level 2 (\$50) _____
- c. Level 3 (\$75) _____
- d. Level 4 (\$100) _____
- e. "Billiard Ambassador" (\$35) _____

MEMBERSHIP BENEFITS

- √ Annual Instructor-Coach Membership package to include certificate, pool pen and membership card.
- √ Sanctioned Player Membership to ACS – directly supports the growth and future of cue sports.
- √ Qualified to use the PAT Testing system and to become a PAT Examiner
- √ Listing on ACS website
- √ Student referrals
- √ Receive regular updates on the program and the ACS through email
- √ Eligibility to compete in the ACS National 8-Ball Championships (Singles only if not an ACS league member).
- √ Eligibility to compete in the ACS National 9-Ball Championships (Singles only if not an ACS league member).

Method of Payment: VISA MasterCard Check or Money Order

Credit Card Number: _____ / CVV: # on back _____ / Amt. + 5% cc service charge

Card Holders Name (as it appears on credit card): _____

Card Holders Signature: _____ Exp. Date: _____ CVV: _____

Send completed application and payment to:

American CueSports Alliance (ACS)

2860 S. State Hwy 161, Suite 160-372

Grand Prairie, TX 75052 / Tel. 469.999.0390/ Fax. 469.999.0038

Email: jybarra@americancuesports.org/ Website: www.americancuesports.org



INSTRUCTOR/COACH APPLICATION

This application must be completed in full and returned to the American CueSports Alliance (ACS) Instructor/Coach Certification Program as part of the recognition process and will become a permanent part of the candidate's file. The appropriate annual fee must be included with this application.

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Fax Number: _____ E-mail Address: _____

Who Referred You To Program: _____

Instructor(s) With Whom You Have Worked: _____

Please answer the following questions:

1. In what year did you become involved with the sport of pocket billiards? _____
2. How long have you been teaching pool? _____
3. Do you have any previous teaching experience other than billiards? _____
4. During the past year, how many students have you worked with on a fee basis? _____
5. How many total hours did that include? _____
6. Are you currently certified in any other instructor program? _____
7. With what program and at what level are you certified? _____
8. Do you work with other ACS Instructor/Coaches? _____ Who? _____
9. Which games are you most comfortable teaching? _____
10. Are you a certified PAT Examiner? _____ Who certified you? _____
11. Do you use any special equipment, printed material, video tapes, video camera, etc.? Please describe on additional sheet; include examples, if appropriate. _____