

**HSC RECREATIONAL**

**ASSISTANT COACHING**

INFORMATION FORM

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE GROUP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (U10 & up co-ed or Girls) \_\_\_\_\_\_\_\_\_\_\_\_\_

CHILD PROTECTING \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Your child must be listed as a protected player on the Head Coaches Application)

CONTACT PHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SHIRT SIZE (Men’s Polo Shirt) \_\_\_\_\_\_\_\_

EMAIL (This is the way the league will contact you. Please use an email address you check on a regular basis) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NUMBER OF YEARS COACHING WITH FHYSC \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DO YOU HAVE A HEAD COACH CHOSEN TO WORK WITH YOU?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES: (EACH TEAM WILL BE ALLOWED ONLY 1 ASSISTANT COACH)

– WHO IS YOUR HEAD COACH? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IF WE NEED TO PLACE YOU IN A HEAD COACHING POSITION, IS THAT SOMETHING YOU WILL CONSIDER?

YES \_\_\_\_\_ NO \_\_\_\_\_