



Cumberland Minor Hockey Association Coach Application Form

Name: _____

Address: _____

Phone: _____ (H) _____ (W)

E-mail: _____ (H)

_____ (W)

Are you Hockey Canada Certified? Yes ___ No ___ NCCP # _____

(If you do not know your NCCP number please contact the Coaching Association of Canada 613-235-5000 and they will provide you with your number)

Have you completed a "Speak Out" course? Yes ___ No ___

CMHA Team you are currently coaching: _____

Level applying for: IP ___ Novice ___ Atom ___ Peewee ___ Bantam ___ Midget ___ Juvenile ___

*Note – The CMHA reserves the right to verify all Volunteer experience as listed above.

By signing this application, I verify that I agree with, am aware of and will support the main objectives of the Cumberland Minor Hockey Association. Should I be entrusted with the opportunity to work with a team, my conduct will be exemplary and, I agree that any behavior on my part or, my staff that is contrary CMHA Code of Conduct for Coaches could result in a loss of coaching privileges.

To be considered as a Volunteer candidate you must agree to the following Conditions:

- A. Accept full responsibility for the team conduct, finances, team officials, etc.
- B. Operate within the CMHA Coach Code of Conduct
- C. Complete a Police Record Check form (every two seasons)
- D. Agree to verification on any information provided on this application form.

Applicant's Signature: _____ Date: _____

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