

# Park City Ice Miners Youth Hockey Coaching Application

Please complete the application "dgrny 0"K"l{qw'ctg'lpnwf lpi 'c'tguwo g'qt'qyj gt'f'qewo gpwu."{qw'f'q'pqv'pggf 'v'eqo r rgy'cp{ 'ugev'kqp" vj cv'ku'lpnwf gf 'lp'yj g'qyj gt'f'qewo gpwu' Rrgcug'g/o ckl'yj g'eqo r rgy'f'cpf 'uki pgf 'cr r rlec'v'kqp'v'q'o r B r twem'eqo "qt'rcz'v'q'657/87: /559; d{ 'vj g'cuuki pgf 'f'gcf r'kpg'0[ qw'y kn't gegkx'g'cp'g/o ckl'eq'p'k'o cv'kqp't'geglr v'qh'f'qw'f'grkx'gt'gf "cr r rlec'v'kqp'0

**Head Coach**       **Assistant Coach**      **Other: (specify)** \_\_\_\_\_

<b>Name:</b>		<b>Last</b>	<b>First</b>	<b>Middle Initial</b>
<b>Street Address</b>				
<b>City</b>		<b>State</b>		<b>Zip</b>
<b>Home Phone</b>		<b>Work Phone</b>		<b>Cell Phone</b>
<b>Email</b>			<b>Driver's License</b>	<b>Birthdate</b>
<b>Have you been convicted (at any time in the past 10 years) of a felony or misdemeanor?</b> <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b> <b>If yes, please explain:</b>				

<b>Please Check the team(s) and level(s) for which you are applying</b>	
<u>Player Level</u> <input type="checkbox"/> Mite <input type="checkbox"/> Squirt <input type="checkbox"/> PeeWee <input type="checkbox"/> Bantam Other: (specify) _____	<u>Team Level</u> <input type="checkbox"/> House <input type="checkbox"/> URL <input type="checkbox"/> Select Other: (specify) _____

Indicate the date and location of all USA Hockey sponsored coaching clinics you have attended or at least last level received.			
<b>Level 1:</b>	<b>Date:</b>		<b>Location:</b>
<b>Level 2:</b>	<b>Date:</b>		<b>Location:</b>
<b>Level 3:</b>	<b>Date:</b>		<b>Location:</b>
<b>Level 4:</b>	<b>Date:</b>		<b>Location:</b>

**Hockey Coaching Experience: (List in order, starting with most recent)**

Year	Association/Team Level	Age Level	Coaching Position

**Hockey Playing Experience: (List in order, starting with most recent)**

Year	Association / Organization / Team



**Background screen authorization/release:** I authorize and give consent to Park City Ice Miners Youth Hockey organization to obtain background information regarding myself. This includes obtaining/conducting a criminal background check and a driver's license check. I understand and authorize that information relative to my background, including criminal matters, may be obtained either in writing, electronically or via telephone. Any person, firm or organization providing information or records in accordance with this authorization in released from any and all claims of liability for compliance. I also agree to release and hold harmless Park City Ice Miners Yourth Hockey Organization, its employees, members, directors, officers and agents, from any liability resulting from any background check of myself.

**As a condition of my eligibility to serve as a coach for Park City Ice Miners Youth Hockey, I acknowledge my agreement to abide by Park City Ice Miners Youth Hockey and Hockey USA coaches code of conduct.**

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Signature

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Date