



2010-2011 Coaching Application

Team Requested:

Team: (Circle One) Mite Squirt PeeWee Bantam Midget

Level: AA A

Position: (Circle One) Head Assistant

Legal Name: _____

Current Address: _____

Home Phone: _____ Email: _____

Work Phone: _____ Email: _____

Cell Phone: _____

USA Hockey Coaching Card # _____ Level _____ Date Attained: _____

References:

Hockey/Coaching Experience: Please detail your hockey playing experience and your coaching experience (if any)

Briefly state why you would like to coach youth hockey and your philosophy on coaching (use reverse side if necessary):

Signature: _____ Date: _____



OYHA COACH APPLICATION & DISCLOSURE STATEMENT

OYHA and its member programs will not authorize in any of its programs that it directly controls any volunteer or employee who has routine access to children (anyone under the age of majority), who refuses to consent to be screened by OYHA or its member programs prior to being issued acceptance/approval for routine access to the children who take part in OYHA or its members' programs.

Last Name	First Name	Middle Initial
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Address	City	State	Zip Code
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Social Security Number Expiration Date	Driver's License Number, State,
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Date of Birth	Cell Phone	Home Phone	Work Phone
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Previous Address(s) if located in another state within the past 10 years

I have read and understand that a person may be disqualified and prohibited from serving as an employee or volunteer of OYHA and its member programs.

1. Have you ever been convicted (including crimes the record of which has been expunged and pleas of "no contest") of a crime of child abuse, sexual abuse of a minor, physical abuse, causing a child's death, neglect of a child, murder, manslaughter, felony assault or any assault against a minor, kidnapping, arson, criminal sexual conduct, prostitution related crimes, or controlled substance crimes?

YES _____ NO _____ If YES, please explain

2. Have you ever been adjudged liable for civil penalties or damage involving sexual or physical abuse of children?

YES _____ NO _____ If YES, please explain

3. Have you ever been subject to any court order involving any sexual or physical abuse of a minor, including, but not limited to domestic order or protection?

YES _____ NO _____ If YES, please explain



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4. Have you ever had your parental rights terminated?

YES _____ NO _____ If YES, please explain

5. Have you ever has a history with another organization (volunteer, employment, etc.) of complaints of sexual or physical abuse of minors?

YES _____ NO _____ If YES, please explain

6. Have you ever resigned, been terminated, or been asked to resign from a position, whether paid or un-paid, due to a complaint(s) of sexual or physical abuse of minors?

YES _____ NO _____ If YES, please explain

7. Have you ever had a history of other behavior that indicates they may be a danger to children in Connecticut Hockey Conference and/or its members' programs?

YES _____ NO _____ If YES, please explain

I certify that all information given by me in this application is true and correct to the best of my knowledge. I understand that false or misleading statements made by me or consequential omissions of any kind in the application process are significant cause for my not being accepted as a volunteer/employee or for my dismissal no matter when discovered.

I authorize OYHA and/or its member programs to investigate all information contained in this application, including, but not limited to a criminal records investigation. The employers, organizations, and individuals name are authorized to give you any and all information regarding my employment, volunteering, character, fitness and qualifications (including opinions) that they have about me.

In consideration of the evaluation of this application by OYHA and/or its member programs, I HEREBY WAIVE, RELEASE AND DISCHARGE OYHA, all its member programs, all employees, organizations and individuals, and any other persons or entities from liability for damages and losses of whatever kind or nature, except liability for willful or intentional acts or punitive damages, that may result from compliance or attempts to comply with this authorization.

Signature _____ Date _____