



JUNIOR COACHING APPLICATION

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All junior coach applicants will be considered based on **Hockey Canada** Registry. The Final selection is at the discretion of the Board of Directors, **MPMHA**.

To be completed by all Applicants: (Please print)

NAME _____.

ADDRESS _____.

POSTAL CODE _____ . PHONE #: (709) _____.

EMAIL ADDRESS: _____.

Applicants Date of Birth: (M/D/Y) _____.

Parents Name: _____.

Parent Contact Info: _____.

Requirements:

Junior Coaches are required by HNL to wear a minimum of Helmet/Mask, Neck Guard, Gloves, stick and Sates to be covered by players insurance.

Divisions Available to Junior Coaches: (Please X Division Requested)

Initiation Program (4-6yr old)	1 st & 2 nd year Jr Coaches	
Novice Hockey Program (7-8yr old)	2 rd & 3 th year Jr Coaches (Special Consideration to siblings)	
Female U-9 Hockey Program (4-8yr old)	1 st to 3 rd year Jr Coaches	
Atom House (9-10yr old)	2 nd to 4 th year Jr Coaches	
Female U-12 Hockey Program	3 rd to 4 th year Jr Coaches	
Peewee Hockey (11-12yr old)	Must be mini 15yr old (Grade 9 or Higher)	

Please be advised that MPMHA may limit the number of participants accepted for this program. Applicants will be considered based on relevant experience and needs of the Jr. Coach program. Final selection is at the discretion of the Board of Directors, Mount Pearl Minor Hockey Association.



Junior Coaching Application Continued

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The junior coach program will operate in the divisions of IP, Novice, Atom & Pee wee as well as U-9 & U-12 Female hockey. Junior Coaches are not eligible to be on the bench for Provincials.

I understand: Applicant signature: _____.

I understand Parent Signature: _____.

Coaching History for Junior Coach Program:

Year	Division (ie. IP, Novice Hockey, Female etc.)

Coaching Reference:

Please provide the name of the head coach in the division you were assigned to last Season.

Name: _____ . Division: _____ .

MPMHA Junior Coach Agreement:

As an approved MPMHA Junior Coach, I agree to follow the directions of the Head Coach of the Division and or Team I am assigned too. To abide by the personal equipment rule for Junior Coaches and to perform my duties with safety in mind while on and off the ice at all times.

I understand that MPMHA reserves the right to remove any junior coach that does not comply with this agreement.

Name: _____ Date: _____ .