

## 2018 - 2019 PCFLL Regional Team U15 Field Lacrosse Program (Women's & Youth)

Coach Application Form			
Zone: PCFLL			
Division: U15	Women's	Youth 🗆	
Position:	Coach Head Coach $\Box$	Assistant Coach 🗆	(check applicable boxes)
Contact Information			
Name:			
Street Address:		City:	
Postal Code:	E-Mail Address:		
Phone (Home):	Phone (Cell):		
Current Coaching Information (if applicable)			
Association:			
Division:	Tier: 1 🗆 2 🗆	☐ Head Coach □ As	sistant Coach □ (check boxes)
Certification #:	Level of	Certification:	
<b>Minimum Requirements</b> – ALL COACHES			
• Women's Fie	titive Introduction Certified Id Community Developmen ood Standing of the BCLA	t (Women's)	

- Outline of Coaching Philosophy (Please Attach)
- Past Coaching Experience (Please Attach)
- Available for All Selection Camps, Training Camps & Tournaments

## **DEADLINE:** September 30<sup>th</sup> 2018 by 4:00 PM Emailed to Trish Keizer: chair@pcfll.bc.ca

\_\_\_\_\_ Applicant Signature\_\_\_\_\_

Date\_\_\_\_\_