



NORTH STAR YOUTH FORUM

2011 – 2012 Coaching Staff Application



TODAY'S DATE: _____

PLEASE CHECK:

_____ NEW APPLICATION

_____ RENEWAL APPLICATION

LAST NAME _____ FIRST _____ MI _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

TELEPHONE (_____) _____ CELL (_____) _____

E-MAIL (REQUIRED) _____

USA HOCKEY or PSA # (REQUIRED) _____

I AM INTERESTED IN COACHING THE FOLLOWING: (check all that apply)

_____ Basic Skills Learn-to-Skate _____ Figure Skating / Off-ice Training

_____ Hockey Learn-to-Skate _____ NSH / Off-ice Training

_____ Hockey Clinics _____ Power Skating

_____ Other (please describe): _____

PRIOR COACHING
EXPERIENCE: _____

ALL NORTH STAR YOUTH FORUM COACHES WILL NEED TO PROVIDE CERTIFICATE OF LIABILITY INSURANCE COVERAGE FOR THEMSELVES AND NORTHBOROUGH YOUTH HOCKEY PROGRAM, INC. AS AN ADDITIONAL INSURED.

RETURN FORM AND PROOF OF LIABILITY INSURANCE COVERAGE TO: North Star Youth Forum
P.O. Box 856
Northborough, MA 01532-0856