CeeBees Minor Hockey Volunteer Application

Name:		
Address:		
	(this is impog to coaches will be sent via e-mail	ortant to include. from the coaching director)
Phone	(home)	(work)
	Position and team applying for Head coach Assistant coach Trainer Team coordinate	or
_	ou are applying for any of the abov	(help with practices only) we positions in order of
	coach/Assistant coach/Trainer will mpleted and announced	be selected per team after
Coaching experience (tear	ms/years)	
Coaching certifications an	d/or clinics (dates completed)	

If you are a first time coach with CeeBees Minor Hockey please provide two reference
names and phone numbers.
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