



COACHING HOUSE B APPLICATION FORM

Name _____ Home Phone (_____) _____

Address _____ Cell Phone (_____) _____

City _____ Zip _____ Work Phone (_____) _____

E-mail Address _____

Date of Birth _____ Current USA Hockey Certification Level _____ Years of Ice Hockey Coaching Experience _____

2008-09 Team (if applicable) _____

Please check which position you are applying for: Head Coach Assistant Coach

Please check which division you are applying for:

Mite B Squirt B Pee Wee B Bantam B

Do you have children who play ice hockey?

Name _____ Age _____ Date of Birth _____

Name _____ Age _____ Date of Birth _____

Name _____ Age _____ Date of Birth _____

Your past coaching experience (level, number of years, etc.) _____

Your past hockey playing experience (level, number of years, etc.) _____

What is your coaching philosophy/mission? _____

- Please submit a copy of your USA Hockey Certification Card (front and back) with this application.
- On a separate sheet of paper, please provide any additional information that may be helpful.
- Please return this form to the address below.

USA Hockey Age Classifications for 2009-10 Fall/Winter Season		
BIRTH YEAR	AGE	DIVISION
1995	14 Years	Bantam
1996	13 Years	Bantam
1997	12 Years	Pee Wee
1998	11 Years	Pee Wee
1999	10 Years	Squirt
2000	9 Years	Squirt
2001	8 & Under	Mite

