



## 2016 – 2017 Coaching Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (Prov) (Postal Code)

Phone: \_\_\_\_\_  
(Res) (Bus) (Cell)

Email: \_\_\_\_\_

NCCP Certification No. \_\_\_\_\_ Level \_\_\_\_\_  
(Please attach details of completed requirements not yet available on your  
Education Transcript from The Coaching Association of Canada)

Additional Clinics or training (Date and details):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Softball BC No. \_\_\_\_\_

Coaching Experience:

	Name of Association	Division / Category of Play / Head Coach / Assistant
2016	_____	_____
2015	_____	_____
2014	_____	_____

Other Significant Coaching Positions (B.C. Zone Team, Team B.C., etc.)

\_\_\_\_\_

References (Name, Phone, Capacity):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

If accepted, you will be required to file a consent for disclosure of criminal record information form with the R.C.M.P. or other police agency



**White Rock Renegades Girls Fastpitch**  
Division of Renegades Sports Association

## 2016 – 2017 Coaching Application

Division of Coaching Position desired (Circle desired team or teams):

U12	U14	U16	U18	U21	Senior A
(Squirt)	(Peewee)	(Bantam)	(Midget)	(Junior A)	
06 or 05	04 or 03	02 or 01	00 or 99		

Head Coach or Assistant: \_\_\_\_\_

Do you have a daughter competing for a position on the team you are applying for? \_\_\_\_\_

What is your Occupation / Profession? \_\_\_\_\_

What unique skills / experience would you bring to this team?

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Reason for applying: \_\_\_\_\_

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Please outline the 1 year program you would run for the Renegades team.

Off-season: \_\_\_\_\_

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Pre-season: \_\_\_\_\_

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Tournament schedule: \_\_\_\_\_

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Goals: \_\_\_\_\_

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Please describe your coaching philosophy. If you are a returning Renegades Coach, describe improvements or changes in your 2016 coaching program or philosophy.

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What kind of commitment would you require from the selected players?

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Do you provide private sport instruction or services for pay? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Are you willing to support the Renegades Sports Association / White Rock Renegades programs?

	Yes	No
Fundraising	_____	_____
Fitness Programs	_____	_____
Scholarship seminar & development	_____	_____
Christmas social	_____	_____
Pep rally	_____	_____
Regular Coaches meetings	_____	_____
Renegades pitching clinics (2x / week)	_____	_____
Renegades catching clinics (1x / week)	_____	_____
Adhere to Renegades philosophy, rules & guidelines	_____	_____
Give on-line web support	_____	_____

Other pertinent information:

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Signature \_\_\_\_\_

Date \_\_\_\_\_