

**London Open Ringette Association  
Coaching/Manager/Trainer Application  
2008/2009**

Mail to: LORA c/o Lesley Wilson 49 Benson Cres., London, ON N5X 2B1

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

Date of Birth : \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

**LEVEL and POSITION DESIRED** (NOTE: ALL bench staff require a criminal record check)  
For both Level and Position please indicate your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice by checking the appropriate column.

Level	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	Position	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>
Open A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Head Coach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Assistant Coach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Open C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Trainer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recreational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**COACHING QUALIFICATIONS**

CC Number \_\_\_\_\_ ORA Number \_\_\_\_\_

In the following table, please enter the date of ORA Certification

CLINIC	LEVEL 1	LEVEL 2	LEVEL 3
Theory	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Technical	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____
Practical	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

**Other Courses (Please check all applicable indicating dates)**

Manager  \_\_\_\_\_ Trainer  \_\_\_\_\_  
First Aid  \_\_\_\_\_ Other  \_\_\_\_\_

**PAST COACHING EXPERIENCE** (Ringette or other sport)

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

**PLEASE STATE YOUR COACHING PHILOSOPHY** (please attach separate sheet if necessary)

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

**WHY DO YOU WANT TO COACH THIS TEAM?** (please attach separate sheet if necessary)

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

Please attach photocopies of all coaching qualifications. If you have any questions regarding this application procedure, please contact Crystal Marshall, LORA Chairperson, [crystalmarshall@hotmail.com](mailto:crystalmarshall@hotmail.com)