MILLWOODS	7

2025-26 Head Coach Application

Name:			
Address:			
mail:			
ategory (Ch	neck all you are interested in) U7:		
Certification	/ Training		
Course	Year Completed	Course	Year Completed
Coach 1		RIS Activity Leader	
Coach 2		Development 1	
Safety		High Performance 1	
Checking Other			
Hockey Coa	ching Experience (start with the	most recent)	
Season	Association	Category	Position
	1		
Briefly desci	ibe your coaching Philosophy		
Declaration			
hereby aut	horize Millwoods Hockey to cond	luct any investigation deemed neo	cessary to verify my credent
•	-		

Bylaws, and Policies of the Hockey Canada, Hockey Alberta, Hockey Edmonton, and Millwoods Hockey. I hereby consent to the above: