



# Prescott & District Soccer Association

P.O. Box 1348 Prescott, ON K0E 1T0

www.prescottsoccer.ca

email: prescottdsa@xplornet.com

## Coach / Assistant Application Form



Please print clearly

First Name		Last Name		Date of Birth	
				Month :	Day: Year:
Mailing Address		Town		Postal Code	
Telephone #		Second Phone # Work <input type="radio"/> Cell <input type="radio"/> Other <input type="radio"/>		Email Address	
Club Last registered With		Interested in Coaching in 2 divisions?		Years of Soccer Experience	
Never Coached <input type="radio"/> PDSA <input type="radio"/> Other <input type="radio"/>		Yes <input type="radio"/> No <input type="radio"/>		Year(s)	
Division(s) Coaching		Interested in Sharing Coaching Duties		Sharing Coaching Duties With who	
U5 <input type="radio"/> U7 <input type="radio"/> U9 <input type="radio"/> U11 <input type="radio"/> U14 <input type="radio"/> U19 <input type="radio"/>		<input type="radio"/> Yes <input type="radio"/> No			
Do you have a son / daughter currently playing with the Club? Yes <input type="radio"/> No <input type="radio"/>					
Child's Name		Year of Birth(mm/dd/yyyy)			
1					
2					
3					
4					
Previous Coaching Experience					
If you have coached a team within the past three years, please indicate					
Year	Club	Division	Team Name		
1					
2					
3					
Coaching Qualifications					
Community Coach Level 1	Yes <input type="radio"/>	No <input type="radio"/>			
Community Coach Level 2	Yes <input type="radio"/>	No <input type="radio"/>			
Community Coaching Senior	Yes <input type="radio"/>	No <input type="radio"/>			
Speak Out Program	Yes <input type="radio"/>	No <input type="radio"/>			
Other (Specify)	Yes <input type="radio"/>	No <input type="radio"/>			
PDSA Coaching Information					
Have you provided PDSA with current Police Check by April 1st?				Yes <input type="radio"/>	No <input type="radio"/>
Are you able to attend the Manditory Coaches Meeting (date to be determined)?				Yes <input type="radio"/>	No <input type="radio"/>
Have you read, understood, and signed our Coaching Code of Conduct?				Yes <input type="radio"/>	No <input type="radio"/>
Do you believe in PDSA's Fair Play Policy (all players are to have equal playing time)?				Yes <input type="radio"/>	No <input type="radio"/>
Are you interested in refereeing during the season?				Yes <input type="radio"/>	No <input type="radio"/>
Are you interested in helping evaluate our referees?				Yes <input type="radio"/>	No <input type="radio"/>
You understand that all coaches must have a meeting with the Players and Parents of their team to discuss the Player, Parent, and Coach Code of Conducts?				Yes <input type="radio"/>	No <input type="radio"/>
Is all information you have provided correct?		Signature		Date	
Yes <input type="radio"/> No <input type="radio"/>					
Administrative Use Only					
Coach Application Accepted By PDSA Executive?				Yes <input type="radio"/>	No <input type="radio"/>
Signature of Club Registrar			EODSA Registered Date:		

## PRESCOTT & DISTRICT SOCCER ASSOCIATION COACHES CODE OF CONDUCT

1. I will give all players equal playing time, equal opportunity, instruction, and support to play on the field.
2. I will remember that participants need a coach they can respect. I will be generous in the praise and set a good example.
3. I must place the well being and safety of each player above all other considerations.
4. I must encourage and guide players to accept responsibility for their own behaviour and performance.
5. I will ensure that all players are properly equipped before going on the field.
6. I will obtain knowledge and the rules of the game according to P.D.S.A. and the Ontario Soccer Association.
7. At all times I will respect parents, referees, players, coaches, and the opposing team.
8. I will clarify with the players, and their parents exactly what is expected of them and also what they are entitled to expect from their coach.
9. I will be on time and prepared for games and practices.
10. I will adhere to **P.D.S.A.'S COACH'S CODE OF CONDUCT** at all times.

I have read and understand the terms and conditions of this agreement, and by signing it voluntarily, I am agreeing to abide by these terms.

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Revised: February 27, 2007