



Wyoming Minor Ball



2024 Coaching Application (Head Coach and Assistant Coach)

Please complete and return via email to wyoingminorball@gmail.com or by mail to P.O. Box 958 Wyoming, ON N0N 1T0 All forms must be received by 12 noon on August 14, 2023

| | | |
|---|--|---|
| Name First: _____ Last: _____ | Address: _____ | <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> Transgender <input type="checkbox"/> Intersex <input type="checkbox"/> I prefer not to say |
| Phone: | Home: _____ | Cell: _____ |
| Email Address: | _____ | |
| # of Yrs Coaching: | _____ | |
| 1st Aid & CPR certified | <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| Applying For: | | |
| <input type="checkbox"/> Head Coach <input type="checkbox"/> Assistant Coach <input type="checkbox"/> Team Manager <input type="checkbox"/> Parent Rep/Score Keeper <input type="checkbox"/> Practice Assistant <input type="checkbox"/> Other _____ | | |
| TEAM REQUESTED: | | |
| Instructional <input type="checkbox"/> Beginner <input type="checkbox"/> Intermed <input type="checkbox"/> Advanced | | |
| Boys <input type="checkbox"/> Rookie 9u <input type="checkbox"/> Mosquito 11u <input type="checkbox"/> Pee Wee 13u <input type="checkbox"/> Bantam 15u <input type="checkbox"/> Midget 18u <input type="checkbox"/> OBA <input type="checkbox"/> SOBA <input type="checkbox"/> River League | | |
| Girls <input type="checkbox"/> Mite u9 <input type="checkbox"/> Squirt u11 <input type="checkbox"/> Pee Wee u13 <input type="checkbox"/> Bantam u15 <input type="checkbox"/> Midget u17 <input type="checkbox"/> PWSA <input type="checkbox"/> Local League | | |
| Previous Coaching Experience | | |
| 1. _____ | | |
| 2. _____ | | |
| 3. _____ | | |
| 4. _____ | | |
| COACHING CERTIFICATIONS | | |
| If Selected to Coach or assist a OBA ,SOBA or PWSA team you will be responsible to obtain the proper coaching certification (re-imbursed by WMBA) | | |
| <input type="checkbox"/> None <input type="checkbox"/> Initiation Online Module <input type="checkbox"/> Initiation Workshop <input type="checkbox"/> Teaching and Learning | | |
| <input type="checkbox"/> Infielding <input type="checkbox"/> Hitting <input type="checkbox"/> Pitching & Catching <input type="checkbox"/> Skills Analysis <input type="checkbox"/> Base Running | | |
| <input type="checkbox"/> Planning Workshop <input type="checkbox"/> Online Portfolio <input type="checkbox"/> Outfielding <input type="checkbox"/> Practice Evaluation | | |
| <input type="checkbox"/> Game Evaluation <input type="checkbox"/> Other: _____ | | |

Please explain why you want to coach and what makes you an ideal candidate to coach the applied for team:

What is your coaching philosophy?

Probation or Suspension?

Are you currently under probation or suspension from coaching duties within any school or community sport program?

Yes No

Criminal Offence Convictions?

Have you ever been convicted of a criminal offence?

Yes No

Criminal Charges Pending?

Do you have any criminal charges pending?

Yes No

If yes to any of the above 3 questions, please provide details: