



west hants basketball

Application

This form is to be completed and submitted to the Shooting Star Basketball Coordinator for consideration, along with any inquiries. Thank you for your interest in coaching with Shooting Star.

General Information

Name: _____ Work Phone: (902) ____-____ Home Phone: (902) ____-____

Cell Phone: (902) ____-____ Email: _____

Mailing Address: _____ Postal Code: _____

Basketball Information

Years of Basketball Experience: Player _____ Coaching: _____ NCCP Level in Basketball: _____

Coaching Clinics Attended: _____ Date: _____

_____ Date: _____

_____ Date: _____

How would you characterize your Basketball Coaching Abilities?

Coaching Preferences(In numerical order rank preferences leave blank those you have no interest)

- ___ Head Coach ___ Mini Girls
- ___ Assistant Coach ___ Mini Boys
- ___ Little Dribblers ___ Bantam Girls
- ___ Junior Mini Coed ___ Bantam Boys
- ___ Junior Mini Girls ___ Midget Girls
- ___ Junior Mini Boys ___ Midget Boys

Important

Volunteer coaches for Shooting Star are required to submit a Child Abuse Registry Check and a Criminal Record Check.

Shooting Star requires coaches to seek out ways to improve their coaching through training and clinic opportunities.

Other Comments:

Is there other ways you feel you could assist the association?

This information will be placed on file with the Shooting Star Board