

PRINCE GEORGE RINGETTE ASSOCIATION

REGISTRATION FOR COACHES – MANAGERS – TRAINERS – REFEREES

NAME: _____

ADDRESS: _____

PHONE NUMBER: Residence _____ Business: _____

COACHING – (Please indicate levels completed & Certificate Number)

Theory: _____

Technical: _____

Practical: _____

Experience: (Indicate # of years in each Ringette Division)

MANAGERS: - Course Completed: _____ (Date): _____

Certificate No. _____

Experience: _____

TRAINERS – First Aid: (Name of Course & Date of most recent Upgrade)

REFEREES – Date last course taken: _____

Level: _____ Certificate No. _____

Experience: _____
