

# **ROYAL CITY YOUTH SOCCER CLUB**

Box 291, 6<sup>th</sup> Street,  
New Westminster, B.C.  
Phone: 604-522-4193  
Web site- <http://www.rcyssc.com>

## **COACHING APPLICATION FORM**

**please complete all sections and return to the club.**

### **PERSONAL INFORMATION:**

Surname:                      First Name:

Phone:                         Fax:

Address:

Date of Birth:                      BCYSA#:

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### **CLUB INFORMATION:**

Age group applying for:

Level:

Coaching Certification level:

Coaching Experience:

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Why do you want to coach at this level?

Last team coached:

Please supply two References:

- 1.
  - 2.
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I would consent to a criminal record search:

Signature: