



2021 HOCKEY CANADA GOALTENDING COACH CERTIFICATION APPLICATION FORM

June 17 – 20, 2021

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Main Phone #: _____ Email: _____

NCCP – CC#: _____ OR HCR #: _____

Member (Branch): _____

Coaching / Instructing Experiences:

Season	Team(s)/ Company	Organization/Level	Role
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

List the reasons why you wish to attend the Goaltending Certification:



What are your expectations of the Goaltending Certification?

What will you be able to do with the information and knowledge gained from the seminar and experience?

Please provide the names, addresses and phone numbers of at least two references familiar with your coaching / instruction background.

Reference 1

Name: _____

Address: _____

City: _____ Province: _____

Main Phone #: _____ Email: _____



Reference 2

Name: _____

Address: _____

City: _____ Province: _____

Main Phone #: _____ Email: _____

In addition to your application you must also enclose a letter of recommendation from a team (current or past) or association as well as video clips of you on ice working with goaltenders.

The video can be sent in via Drop Box, YouTube links, external memory drive / stick or any other method you currently use. There is no specific length of video required but it must be of good quality and significant enough to show your skills on ice in performing and teaching young goaltenders.

Please return this application to Hockey Canada **prior to March 31, 2021.**

Attention: **Katie Greenway, Coordinator, Hockey Development**
201 – 151 Canada Olympic Road, SW
Calgary, AB, T3B 6B7
kgreenway@hockeycanada.ca
Telephone: 403-284-5018