



NORFOLK TIMBERWOLVES

Simcoe Minor Lacrosse COACH Application

Name			
Address			Home Phone
			Cell Phone
Email			
APPLICATION			
1 st Team Choice			
2 nd Team Choice			
NCCP #			
Certifications – List all that apply			
You must attach a copy of your certification(s)			
Do you potentially have a child playing at this level?			Yes No
Please list three references we may contact by phone;			
Name		Phone #	
Do you have staffing recommendations for this team? If so, please identify them below			
Name	Position	Certified	
		Yes	No
		Yes	No
		Yes	No
		Yes	No
PREVIOUS COACHING EXPERIENCE			

Please return completed form and required documentation to: smlatournament@gmail.com

