## RIVER CITY YOUTH SOCCER LEAGUE

## CERTIFICATION OF INTENDED COACH COURSE

## 1st YEAR COACH -- RECREATIONAL CLUBS ONLY

New Coach Applicant: _		
	☐ Head Coach	☐ Assistant Coach
Club Name:		Club Number:
Team Name, if known: _		
I certify that I am a <u>NEW COACH</u> this year. I am committing to attend the following Coaching License Course either (1) this year if a course is available or (2) by July of next year:		
Course Level:		
Course Dates:		
Location of Course:		
Sponsoring League:		
I understand that upon completion of my course I must provide the Club Registrar with a photocopy of my Coaching License card to attest to my satisfactory completion of this course.		
I understand that a Coach Pass cannot be issued without proper documentation.		
Comments:		
Signature:		Date:
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