



## 2023 Canada Winter Games Assistant Coach

### Registration Form

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address Line 2: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ (Work)

Telephone: \_\_\_\_\_ (Home)

Telephone: \_\_\_\_\_ (Cell)

E-Mail: \_\_\_\_\_

Level of Certification: \_\_\_\_\_

Club Name: \_\_\_\_\_

**\*\*\* Please attach your coaching resume \*\*\***

**Please complete registration form and e-mail to Carla MacNeil at [excdir@skinb.ca](mailto:excdir@skinb.ca)**

For more information, please contact Carla MacNeil at 1 (506) 643-1535