ADELAIDE OLYMPIC FC COACHING APPLICATION FORM



Please complete the fields below and email back to the Secretary of Adelaide Olympic Football Club.

PERSONAL DETAILS									
Full Name	2								
Home Ad	dress								
Suburb							Post Code		
Email									
Home Ph				Work Ph			Mobile		
Occupation									
COACHING QUALIFICATIONS									
Coaching Certificates									
Accredita	tion Level								
Coaching	Experien	ce							
Years		Club		Age Group / Details					
Playing E	xperience								
Years Club				Age Group / Details					
PREFERRED AGE GROUP - Please tick []Coach, []Assistant, []Team Manager									
Please write 3 preferred age groups you wish to coach, the 1st being the most proffered.									
Development, U6, U7, US				U10, U11, I8, Reserve			U15, U16	, U17,	Gender Boys Girls
1st			2nd			3rd			
Remune	ration		-	thes are volunteers, we would appreciate it if you would like to ite YES in the box to volunteer.					Volunteer
Amount \$		per season		All volunteer coaches will receive a discount towards their child's fees.					
Please note all coaching applications will be CONFIDENTIAL, attach additional pages if required.									
Please email completed applications to: secretary@aofc.com.au									