

COACHING REQUEST FORM

SKATER'S NAME _____ AGE _____ BD (M/D/Y) _____

PARENT / GUARDIAN NAME _____ PH# _____ PH# _____

EMAIL _____ SKATE CANADA # _____

Link to Coaches Page <https://www.skatebattlefords.ca/coaches/>

Link to Ice Schedule <https://www.skatebattlefords.ca/skating-schedule/>

Highest Star Test Passed

Star _____ Skills (SK)

Star _____ Freeskate Program (FSP)

Star _____ Freeskate Elements (FSE)

Star _____ Dance (D)

Star _____ Artistic (ART)

Star _____ Synchro (Syc)

SKATING PACKAGE	✓
4 HR.	<input type="checkbox"/>
6 HR.	<input type="checkbox"/>
8 HR.	<input type="checkbox"/>
Off-Ice Mon. 5:PM-5:30	<input type="checkbox"/>
Off-Ice Thurs. 6:15-6:45PM	<input type="checkbox"/>
Off-Ice Sat. 9:45-10:15AM	<input type="checkbox"/>

SESSION NUMBER	✓
#1 (4-5 Mon.)	<input type="checkbox"/>
#2 (7-8 Mon.)	<input type="checkbox"/>
#3 (8-9 Mon.)	<input type="checkbox"/>
#4 (AM Wed.)	<input type="checkbox"/>
#5 (7-8 Thurs.)	<input type="checkbox"/>
#5A (8-9 Thurs.)	<input type="checkbox"/>
#6 (4-5 Fri.)	<input type="checkbox"/>
#7 (5-6 Fri.)	<input type="checkbox"/>
#8 (6-7 Fri.)	<input type="checkbox"/>
Buy-On (7-730 Fri)	<input type="checkbox"/>
#9 (1030-12PM Sat.)	<input type="checkbox"/>

Coaches will Confirm Availability and Options	COACHING TEAM	BASE	DISIPLINE	√ COACH & DISCIPLINE					
		✓	✓	SK	D	FSE	FSP	ART	
All Disciplines and Base Coach Star 1 - 5 Test and Competition Evaluator <i>Available Monday Friday, Saturday</i>	Jessica Reese	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Training, Off-Ice Harness, Spinner, Dance Available All Days	Greg Melchior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
All Disciplines and Base Coach, Star 1-5 Evaluator Available All Days	Cindy Tymoruski	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Information About Your Skater We Should Be Aware Of?