

# COACH PROFILE

# GRASS ROOTS

## NOMINEE INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_  
CC# \_\_\_\_\_  
C5PBA# \_\_\_\_\_

## NOMINATED BY:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/Province: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_

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### 1 CERTIFICATION

Fully Certified (Theory, Technical and Practical) at: Level 1 \_\_\_\_\_ Level 2 \_\_\_\_\_

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### 2 COACHING in Prov 5PBA and C5PBA Tournaments (Youth Challenge, Open and events sanctioned by either Prov5PBA or C5PBA). Please specify.

Tournament _____	Tournament _____	Tournament _____
Regional/Zone _____	Regional/Zone _____	Regional/Zone _____
Provincial _____	Provincial _____	Provincial _____
National _____	National _____	National _____
Medallist at Provincial Championships	Gold _____ Silver _____ Bronze _____	
Medallist at National Championships	Gold _____ Silver _____ Bronze _____	

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### 3 COACHING in MBAC programs

Master/YBC tournament _____	Coach Provincial MBA Team _____
Medallist at Provincial Championships	Gold _____ Silver _____ Bronze _____
Medallist at National Championships	Gold _____ Silver _____ Bronze _____

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### 4 COACHING in YBC Programs

Number of weeks actively coaching in the previous year \_\_\_\_\_

Coach of YBC team(s). Please specify.

Tournament _____	Tournament _____	Tournament _____
Regional/Zone _____	Regional/Zone _____	Regional/Zone _____
Provincial _____	Provincial _____	Provincial _____
National _____	National _____	National _____
Medallist at Provincial Championships	Gold _____ Silver _____ Bronze _____	
Medallist at National Championships	Gold _____ Silver _____ Bronze _____	

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### 5 INVOLVEMENT in other Coaching Activities.

NCCP Course conductor _____	Bowling School _____	Special Needs Coach _____
Coaching Seminars _____	Learn to Bowl Clinicics _____	Other _____