

Winnipeg Blizzard Organization Application Form



Applicants may be asked to be interviewed for positions, though not all applicants will be interviewed.

First Name

Email

Date of Birth

Day

Month

Year

Last Name

Phone

NCCP Number

Team(s) Applying For

☐

Jr A

☐

Jr B

☐

Senior B

☐

U13 Prov A

☐

U15 Prov A

☐

U17 Prov A

Role(s) Applying For

☐

Head Coach

☐

Asst Coach

☐

Manager

☐

Volunteer

☐

Timekeeper

☐

Shot Clock

☐

Athletic Therapist

Briefly describe why you are applying for the role(s) specified and why you would be a good fit for the program

Reference #1

First Name

Last Name

Email

Phone

Reference #2

First Name

Last Name

Email

Phone

☐


I acknowledge any applicant selected to the organization will be required to provide a criminal record check.

☐

I certify that the information provided is true and complete to the best of my knowledge.

**Electronic
Signature**



 (204) 296-8733

 winniepegblizzard@gmail.com