

Equestrian Canada Western Competition Coach Specialist Evaluation Application 2018

Name: _____

Address: _____

City: _____ Postal Code: _____

Telephone: _____ Cell Phone: _____ Birth Date: _____

Email address: _____

Date and location for Evaluation being applied for: _____

Specialty: _____

Equestrian Canada Gold Sport License number (enclose copy of current years card) _____

Horse Council BC Number _____ NCCP number _____

First Aid Certificate (enclose copy of card) Criminal Record Check

Portfolio Yearly Training Plan

Lesson Plan 1 Lesson Plan 2 (topics must be from the list)

Emergency Action plan (for the barn you are most familiar with)

Copy of NCCP Transcript
(Showing MED online assessment completion and Making Headway Concussion training)

Signed Code of Ethics Signed Code of Conduct Signed Coach Discipline Policy

Signed Medical form

Payment enclosed in the amount of \$525.00 plus GST

Credit Card number - _____ Exp date - _____

Mail application and all requirements to Horse Council BC a **minimum of 30 days prior** to the Evaluation date. Only complete applications will be given Evaluation space.

Return to:

Horse Council BC

Wendy Sewell, Coaching Manager coaching@hcbc.ca www.hcbc.ca
27336 Fraser Hwy, Aldergrove, BC V4W 3N5 604-856-4304, fax 604-856-4302

