

**APPLICATION TO COMMENCE TRAINING AS AN ACCREDITED BNZ DEVELOPMENT COACH**

I, , play bowls at the Club.

I have a good understanding of the game of bowls.

I wish to undertake the training programme to become an Accredited Bowls NZ Development Coach.

Applicant's Address:

E-mail:

Phone: (H): (Wk): (Mob)

**MENTOR COACHES SUPPORT:**

This is to certify that I have agreed to support this coach to become an accredited bowls coach.

Signed: Accredited Coach Date: / /

**CLUB'S SUPPORT:**

The above Applicant is a member of this Club and the Club Executive will support the application to train for accreditation as a Bowls NZ Development Coach.

Signed: Date: / /

Office held:

**CODE OF ETHICS:**

I have read and agree to abide by the Bowls NZ Coaches Code of Ethics

Applicant's Signature: Date: / /

**BNZ DEVELOPMENT COACH COURSE ATTENDANCE:**

This is to certify that the above Applicant has completed the Coaching Principles and Sport Specific training.

Signed: Coach Trainer Date: / /

**ASSESSMENT RESULT:**

This is to certify that has completed the post course practical and assessment requirements to become an accredited Bowls NZ Development Coach

Signed: Assessor Date: / /

**Accreditation Issued:** / / **Registered:** / /