

APPLICATION TO COMMENCE TRAINING AS A BOWLS NEW ZEALAND COACH

I, _____ (Full Name)
am a playing member of the _____ Club.

I have a good understanding of the game of bowls.

I hereby make an application to undertake the training programme to become a: (Please Circle)

Foundation Coach. (One Day Course)

Development Coach (Two Day Course)

Reaccreditation (Sunday Only)

E-mail: _____

Telephone: (Home) _____ (Mobile) _____

MENTOR COACHES SUPPORT:

This is to certify that I have agreed to support this bowler to become a trained Foundation Coach.

Name: _____ Signed: _____ Date: __/__/20__

CLUB'S APPROVAL:

The above Applicant is a Full Financial member of this Club and the Club Executive supports their application to train as a Foundation Coach.

Name: _____

Office Held: _____

Signed: _____

Date: __/__/20__

CODE OF ETHICS:

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

Applicant's Signature: _____ Date: / /

Bowls New Zealand Coaching Course Completion - (please bring to course)

This is to certify that the Following Applicant has completed the approved course.

Level: Foundation / Development

Name: _____

Club: _____

Location of Course: _____

Date of Course: ___ / ___ / 20___

Coach Trainer: _____

Signature: _____

Bowls New Zealand Coaching 20 Practical hour assessment: (Development Coaches)

The above has completed their 20 hours of practical coaching and is now able to be recognised as an accredited Development Coach.

Date of accreditation: ___ / ___ / 20___

Reaccreditation due: ___ / ___ / 20___

Coach Trainer: _____

Signature: _____