

EMAIL: cayugaskatingclub@gmail.com
 OFFICE: Cayuga Memorial Arena
 MAIL: P.O. Box 103, Cayuga, On N0A 1E0
 WEB: www.cayugaskatingclub.ca



2018-2019 Program Assistant Application

Instructions: Complete all information below and submit Program Assistant (PA) form, by emailing cayugask8coaches@gmail.com Alternatively, forms can be mailed Attention Cayuga Skating Club, P.O Box 103, Cayuga, Ontario, N0A 1E0

PA's First Name:	PA's Last Name:	Birthdate (yyyy-mm-dd):	Age:
Home Phone:		Cell Phone:	
PA's Email:		Email may be used by CSC for notification of club news and to register member(s) with Skate Canada for membership distribution. The Club DOES NOT release email information to 3 rd parties.	
Years of Program Assistant Experience	<input type="checkbox"/> None <input type="checkbox"/> 1 Year <input type="checkbox"/> 2 Years <input type="checkbox"/> 3 Years or more		
High School Students	<input type="checkbox"/> Yes I plan on allocating PA hours to high school volunteer credits	# of hours:	

PROGRAM ASSISTANT TRAINING (Required: 1 Off Ice Session & 1 On Ice Session)

Off Ice Training	<input type="checkbox"/> Tuesday October 2, 2018 5 pm	McSorely Hall
On Ice Training	<input type="checkbox"/> Tuesday October 2, 2018	Cayuga Memorial Arena

As a Program Assistants (PA), I agree to abide by the following:

1. I will be **ON TIME** and will be **ready and dressed 10 minutes before** the assigned session start time.
2. If I am unable to assist on a session that I have committed to, it is my responsibility to find a replacement. I will also inform the coaching coordinator for the session.
3. I agree to attend all required Program Assistant training sessions.
4. I will wear appropriate clothing.
5. I will not bring food or drinks on the ice.
6. I will be available for the warm up and to help the younger skaters. I will stay with my group(s) as instructed by the coaches.
7. I will assist and take instruction from the coaches during the lesson.
8. I will be available off ice to assist with lacing skates.
9. I will remember that I am a role model for younger skaters and will behave appropriately on and off the ice.
10. I am making a commitment for the whole season. If for some reason, I am not able to fulfill this commitment, I will contact the appropriate Coaching coordinator.
11. I give Cayuga Skating Club permission to include my phone number on a list to be distributed to other Program Assistants and coaches to be used internally within CSC.

Signature (Skater) _____ Date: _____

Signature (Parent/Guardian) _____ Date: _____

(if under the age of 16 years old)

FOR OFFICE USE ONLY

Head Coach Signature:	<input type="checkbox"/> This Skater has completed Off Ice and On Ice Training	Date:
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