



**Canada Olympic Park
Calgary, Alberta
June 17 – 21, 2020**

Member (Branch): _____

Season	Team(s)/ Company	Organization/Level	Role

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What are your expectations of the Goaltending Certification Seminar?

What will you be able to do with the information and knowledge gained from the seminar and experience?

Please provide the names, addresses and phone numbers of at least two references familiar with your coaching / instruction background.

Reference 1

Name: _____

Address: _____

City: _____ Province: _____

Main Phone #: _____ Email: _____



Reference 2

Name: _____

Address: _____

City: _____ Province: _____

Main Phone #: _____ Email: _____

In addition to your application you must also enclose a letter of recommendation from a team (current or past) or association as well as video clips of you on ice working with goaltenders.

The video can be sent in via Drop Box, YouTube links, external memory drive / stick or any other method you currently use. There is no specific length of video required but it must be of good quality and significant enough to show your skills on ice in performing and teaching young goaltenders.

Please return this application to Hockey Canada's office **prior to March 2, 2020.**

Attention: **Katie Greenway, Coordinator, Hockey Development**
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 Calgary, AB, T3B 6B7
 kgreenway@hockeycanada.ca
 Telephone: 403-284-5018