



REPRESENTATIVE TEAM TRAINERS APPLICATION



(A) PERSONAL DETAILS

SURNAME			
First Name/s			
Date of Birth		Gender (circle)	Male Female
Address			
City / Town		Club Affiliation	
Home Phone		Work Phone	
Mobile		Fax	
Email			

CERTIFICATES HELD (attach copy of resume and certificates)

NZRL ACCREDITATION	LEVEL	YEAR

TRAINERS EXPERIENCE (MOST RECENT)

CLUB/ TEAM/REP SIDE	GRADE	YEAR

(B) TEAM/GRADE APPLIED FOR

Team

Grade

If unsuccessful I am also available for the:

Team

Grade

Do you have any events/commitments that may result in you being absent from any CRL representative trials or fixtures?

Yes / No

(Please circle one)

If successful in obtaining the coaching position, do you have conflicts of Interest with regards to being a selector? I.e. child trialling for the team you are coaching?

Yes / No

(Please circle one)

If you have answered yes to the above question, please note a neutral selector will be appointed to determine the selection of your child

If your child is not selected in the team you are training, will you still be available to train the team

Yes / No

(Please circle one)

(C) PERSONAL INFORMATION – CONSENT TO COLLECT

Do you have any convictions or charges pending for any of the following? (tick):

Dishonesty

☐

Drugs

☐

Alcohol

☐

Sexual
abuse

☐

Assault
verbal/physical

☐

Domestic
violence

☐

I consent to the collection of the above details by the Canterbury Rugby League for the general administration of the sport. I acknowledge my right to access and correction of this information. This consent is given in accordance With the "Privacy Act 1993."

SIGNATURE

DATE

SIGNATURE CLUB
SECRETARY / REGISTRAR

DATE

Please return completed form to: Chou Teiwaki
chou@crfl.co.nz or PO Box 76180 Northwood Christchurch 8548