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Description automatically generated***

***Approved Coaches Requirements Form***

Requirements must be met in order to become an approved Silver Lining Club coach. Approved coaches are exempt from $5-/hr freestyle fee, and are added to list for those new skaters interested in private lessons. **Club Coaches will be required to attend a MANDATORY meeting (at a location or via Zoom) once every 3 to 4 months.** Please retain this form and fill out properly, when completed turn in for review.

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emaik:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ISI Pro #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_PSA #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Must be registered with **ISI**, as a professional representing Silver Lining Skating Club.
2. Must sign and return **Coaches Code of Conduct**.
3. Must have **Liability Insurance** through PSA, yearly.
4. Must Have completed **PSA CER’s**, yearly.
5. Must **Volunteer** at least one show or club event.

Event & Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Must volunteer and complete coaching **3(Three)** full **8 week** Learn to Skate/Tots Session.

Session Dates:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

::::OR::::

Must have **4** skaters contract a freestyle session each month, in the event we do not have a class for you.

Skaters Names:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Must volunteer to judge 3 times at competitions, in addition to what is required of coaches at each competition.

Competition/Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Please provide copy of:

* Liability Insurance
* Completion of PSA CER’s
* Background Check Approval through ISI.
* ISI Membership
* PSA Membership

If you have, please provide as well:

* USFSA SafeSport completion
* USFSA Membership/Green Light