



PARKLAND AREA SOCCER CLUB



Coaching Course Reimbursement Form

Candidate Information:

Full Name _____
 Address _____
 City _____ State _____ ZIP _____
 Phone _____ Email _____
 Birthdate _____ M/F _____ Occupation _____

Course Date	Location	Course	Registration Fee

Coaching Experience: (list most recent first)

Where (i.e. School, Club, etc.) / Level (i.e. College, H.S., Club) / Years (i.e. 1995-present)

Playing Experience:

Previous Coaching Certifications:

NSCAA, USSF, Other

The *Parkland Area Soccer Club* will review all applications, select candidates, and establish a priority waiting list. All applicants will be notified as soon as possible. Upon successful completion of course, coach will be reimbursed course registration fees. All applicants will be required to coach within **PASC for one full year after completion of the course or applicant/coach will reimburse Parkland Area Soccer Club the total course registration fee.**

Parkland Area Soccer Club * P.O. Box 462, Orefield, PA 18069 * 484-375-8396

