



Ontario 5 Pin Bowlers' Association

Mailing Address Only: 5-18 Ringwood Drive, Suite 129, Stouffville, Ontario, L4A 0N2
Telephone: (416) 426-7167 E-Mail: o5pba@o5pba.ca Website: www.o5pba.ca

ONTARIO OPEN 5 PIN CHAMPIONSHIPS ONTARIO SENIOR OPEN 5 PIN CHAMPIONSHIPS COACHES REPORT FORM

Please e-mail this report form to results@o5pba.ca within two (2) weeks of your Zone roll-offs being completed.

All Ontario Open Men's, Ladies' and Mixed Team Coaches must be **COMPETITIVE COACH CERTIFIED** on or before **DECEMBER 31 OF THE CURRENT BOWLING SEASON** and must be a member in good standing of the Ontario 5 Pin Bowlers' Association.

All Ontario Senior and Assistant Team Coaches must be a minimum **COMMUNITY COACH TRAINED** on or before **DECEMBER 31 OF THE CURRENT BOWLING SEASON** and must be a member in good standing of the Ontario 5 Pin Bowlers' Association.

Please Note: If a team cannot decide on a coach from within their Zone, the selection will be done based on the new guidelines in the Coaching Selection under Open Championships.

To be certified in the Competitive Coach Module, a person must be trained in the Community Coach context. All coaches wishing to coach **ANY** C5 event must complete the NCCP Making Headway and Safe Sport online training, prior to attending that event.

Zone Association: _____

Tournament Director: _____

Date of Report: _____

MEN'S TEAM COACH

Name: _____

Address: _____ City: _____

Postal Code: _____ Telephone: _____

O5PBA Membership No.: _____ Passport Number: _____

E-Mail Address: _____

LADIES' TEAM COACH

Name: _____

Address: _____ City: _____

Postal Code: _____ Telephone: _____

O5PBA Membership No.: _____ Passport Number: _____

E-Mail Address: _____

MIXED TEAM COACH

Name: _____

Address: _____ City: _____

Postal Code: _____ Telephone: _____

O5PBA Membership No.: _____ Passport Number: _____

E-Mail Address: _____

SENIOR TEAM COACH

Name: _____

Address: _____ City: _____

Postal Code: _____ Telephone: _____

O5PBA Membership No.: _____ Passport Number: _____

E-Mail Address: _____

PLEASE INFORM THE PROVINCIAL OFFICE IF YOU HAVE ANY

ASSISTANT COACHES FOR YOUR TEAMS

1. _____
2. _____
3. _____