

FORM FOR BENCH STAFF / FORMULAIRE POUR LE PERSONNEL DU BANC

FULL TEAM NAME/NOM COMPLET DE L'ÉQUIPE _____

Function (Head coach, assistant coach, manager, etc.)	Head Coach	1st Assistant	2nd Assistant	Manager
Full name				
Complete address				
Phone (Home)				
Phone (Office)				
Date of Birth				
Medicare Number				
E-Mail Address				
Postal Code				

Please use a separate sheet if you need more space. Note that teams who have trainers must register them as members of their team.