

**MIDDLE ATLANTIC**  
**Assistant Zone Team Coach**  
**2005 Short Course All-Star Zone Meet at GCIT**

***Application Deadline is January 31, 2005***

I, \_\_\_\_\_ hereby apply for consideration as an Assistant Zone Team Coach. I understand that I must be available from March 30, 2005 – April 2, 2005. I also understand that I will receive equipment, transportation to and from the meet, meals and hotel accommodations. I further understand that I will remain with the team both on deck and reside at the team hotel with the team.

Full Name: \_\_\_\_\_ Male/Female: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Club You Represent: \_\_\_\_\_

I would like to coach the following age group: (Please designate your preference by 1, 2, & 3)

10&U Boys _____	10&U Girls _____
11-12 Boys _____	11-12 Girls _____
13-14 Boys _____	13-14 Girls _____
15-18 Boys _____	15-18 Girls _____

Have you ever been a zone team coach? \_\_\_\_\_ If yes, when? \_\_\_\_\_

Please list your zone coaching experience (if any) and your reasons for wanting to coach the zone team

\_\_\_\_\_

\_\_\_\_\_

Please circle sizes:

T-shirt Size	Adult Small, Medium, Large, XL, XXL
Collared Knit Shirt Size	Adult Small, Medium, Large, XL, XXL
Jacket Size	Adult Small, Medium, Large, XL, XXL
Sweatshirt Size	Adult Small, Medium, Large, XL, XXL

Mail or fax completed application to:

Monique Termin  
5835 Spring Tree Court  
Enola, PA 17025  
Fax: 717-774-2113