

# "SAMPLE" LOCAL 5 PIN BOWLERS' ASSOCIATION COACH SURVEY FORM

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE (Home): \_\_\_\_\_

(Business): \_\_\_\_\_

E-MAIL ADDRESS (Print Clearly): \_\_\_\_\_

PASSPORT #: \_\_\_\_\_

\_\_\_\_\_ **5 PIN BOWLERS' ASSOCIATION** is in the process of updating our files on all qualified Level 1 and Level 2 coaches. We would appreciate you taking a few minutes to complete the following survey, and then returning it in the enclosed stamped envelope.

It is our goal to utilize all our potential Coaches in the coming season for both Adult and Youth Tournaments. Your cooperation is greatly appreciated and we thank you in advance for your time.

*Are you interested in coaching in the Zone?* ☐ Yes ☐ No

*Do you prefer to coach:* ☐ Adult Bowlers ☐ Youth Bowlers ☐ Both

*Have you ever coached at the Ontario Open Provincials?* ☐ Yes ☐ No

*Would you like to (Date: April 8-11, 2009):* ☐ Yes ☐ No

*Have you ever coached at the Youth Challenge Tournament?* ☐ Yes ☐ No

*Would you like to (Date: TBD):* ☐ Yes ☐ No

*Have you ever coached at the Holiday Classic Tournament?*

*Would you like to (Date: TBD):* ☐ Yes ☐ No

*Have you ever coached in an YBC Program:* ☐ Yes ☐ No

*Do you still coach YBC:* ☐ Yes ☐ No

*If yes, please advise the Bowling Centre* \_\_\_\_\_

Name: \_\_\_\_\_  
(Please Print)

Signature: \_\_\_\_\_

**Please return this form to:**