



**APPLICATION FOR COMPETITIVE DEVELOPMENT CLINIC 2017**

**Clinic DATES - February 16-18, 2018**

**Alberta Lacrosse Association Office**

**Coaching History:**

\_\_\_\_\_  
Last Name                      First Name                      Email

\_\_\_\_\_  
Street Address                      City                      Postal Code                      Phone

Certification Number: \_\_\_\_\_                      Number of years Coaching: \_\_\_\_\_

Club: \_\_\_\_\_                      Level: \_\_\_\_\_

**DEADLINE: February 14, 2018**

**Part B**

<b>FRIDAY</b>	7:00-7:15	Introduction
	7:15-10:00	Module Two - The Coach Managing Conflict
<b>SATURDAY</b>	9:00-12:00	Module Four - Technical Preparation Power Play Man Short Special Situations
	12:00-1:00	Lunch
	1:00-5:00	Module Five - Mental Preparation Psychology of Performance
<b>SUNDAY</b>	9:00-12:00	Module Seven - Planning Managing Support Personnel Supporting the Competitive Experience

\_\_\_\_\_  
Date                      Applicant's Signature

**Clinic fee - \$65.00**

**Please Return Completed Application Form**

**Please mail:**                      **Alberta Lacrosse Association**  
#4 - 9 Chippewa Rd  
Sherwood Park, AB T8A 6J7