



RINGETTE MANITOBA COACH OF THE MONTH NOMINATION FORM

Nominee: _____ Telephone: _____

Coaching Title/Team: _____

Email: _____

DETAILS OF INVOLVEMENT

Please attach separately a brief outline describing why your coach should be selected as coach of the month. Please include a description of characteristic that sets your coach apart from others. Nominations will be accepted for coaches at any division or level, and can be submitted by anyone.

CRITERIA

- Showing respect for officials, opponents, parents, and promoting a philosophy of fair play;
- Presenting a positive public image of coaching and the role of the coach;
- Apply relevant training, to real life situations;
- Be a positive role model and teach players the value of a team, hard work, to have fun and accept the results of a game in a positive manner.

Please forward nominations and supporting documentation to:

RINGETTE MANITOBA
145 PACIFIC AVENUE, WINNIPEG, MB, R3B 2Z6
ringette.admin@sportmanitoba.ca

SUBMISSION DEADLINE: APRIL 3rd annually

Nominator: _____

Home Phone: _____

Email: _____

Daytime Phone: _____

SIGNATURE - Nominator

Date

SIGNATURE - Local Association President

Date

Does the nominee know that he/she has been nominated? Yes No