Southwest Hockey Coach Reimbursement Form



Name:		Circle One: Parent Coach / Non-Parent Coach		
Email:	Team(s):			
 Form must be filled out completely. Only ONE submission per coach, per season. Only courses taken & receipts dated for the current season are eligible for reimbursement. Submissions will be accepted between November 1, 2020 – February 1, 2021 Submissions first require approval by the Director of Coaches. Approved forms are then sent to the SW Hockey Treasurer to finalize the reimbursement. Drop off: Cardel Rec South Reception Office; Attention: Director of Coaches – Southwest Hockey. Coaching Certifications will be reimbursed 100% of the course fee; only for required courses, that are for the age division in which you are coaching in. Payments: Approved submissions received by the Treasurer between the 1st & the 20th of each month can expect to pick up their reimbursement cheque on the 15th of the following month. Submissions received by the Treasurer outside of these dates, will be extended by a month. Reimbursement cheques will be available for pick up at the Cardel Rec South Reception Office on the 15th of each month. You will be notified when they are ready. Final date to pick up your Reimbursement Cheque; is March 15, 2021. Cheques not picked up by March 30th will be returned to Southwest Hockey and will be cancelled. Courses: Police Checks will be covered 100%, ONLY if the approved SWH process is followed. If a coach 				
chooses to pay, <u>OR</u> there is a need for fin Course Name	Date	Receipt(s)	Certificate(s)	Cost of
Respect in Sport – Activity Leader	Completed	Enclosed (✓)	Included (✓)	Course
HCAN / Hockey University (HU) – Safety				
Part 1: HU - Online Coach 1 &/or Coach 2				
Part 2: Coach 1 – Intro to Coach				
Part 2: Coach 2 – Coach Level				
Part 1: HU - Online Checking				
Part 2: Instructional - Checking				
Development Level 1				
Tot	al Requeste	d Amount for Re	imbursement:	\$
I understand the above policy, & will include this form, all receipts & certificates with this submission. Coach Signature:				
SW Hockey Office: Total Reimbursement: \$ Che	eque Date:		Cheque #:	