



Select Squad Coaching Application

Please complete form and email to secretary.lcfa.2021@gmail.com

Name:

Mobile/phone:

Address:

Email:

Grade Preferred #1:

Grade Preferred #2:

Coaching Qualification held:

Expiry date:

Last coaching position held:

Do you have a team manager? Name:

Current Working with Children Check:

Current National Police Check?:

Coaching positions are locked in for both Championships,
do you agree?:

The LCFA Board reserve the right to terminate a position if
Coaches / Managers do not abide by relevant Football SA
or LCFA Rules & Regulations. Do you agree?:

Abide by the FSA Officials Code of Conduct

(see attached):

Agree that players will be given equal match time over the
course of the tournament(s):

Agree to attend the induction training session and hold
training sessions at a time designated by LCFA

Signed:

Date:

BSB & Account (for payment):