

Southern Lehigh Soccer League Coaching Application

Name: _____ **Date:** _____

Address: _____

Email: _____ **Phone:** _____

Age Group: _____ **Male:** **Female:**

What Level Team? _____ **A:** **B:** **C:** **Any:**

Licenses Obtained? _____

**Soccer
Coaching
Experience:** _____

Please Submit Application To:
Wayne Hefner
Director Of Travel
4880 Penns Way
East Greenville, PA 18041

Southern Lehigh Soccer League Coaching Application

**Soccer
Playing
Experience:**

**Soccer
Coaching
Philosophy
and
Objectives:**

**Availability for
games & Practice
(ie. Fall, Spring,
Winter) :**

Do You have a child playing on the team: Yes: No:

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