



**Alberta  
Equestrian  
Federation**

## Instructor/Coach File Declaration

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### Instructor/Coaching File Declaration

I, \_\_\_\_\_ hereby wish to open an Instructor/Coach file with the Alberta Equestrian Federation. I understand that this file will be maintained by the Alberta Equestrian Federation and that all prerequisites will be kept confidentially in hard copy format. I acknowledge that all prerequisites must be submitted prior to attending an evaluation for my certification. I understand that I am responsible for my own preparation and will not hold Equestrian Canada, the Alberta Equestrian Federation, or the Evaluator(s) responsible for the overall results of my evaluation. By signing and submitting this form, I declare that I will be actively pursuing my Instructor/Coach certification.

First & Last Name: \_\_\_\_\_

P/TSO Membership #: \_\_\_\_\_

Primary Address (including city, province, postal):  
\_\_\_\_\_

Discipline Interests (check all that apply):

English     Western     Driving     Saddle Seat

Level Interests (check all that apply):

Instructor     Competition Coach  
 Competition Coach Specialist     High Performance Coach

How/Where did you hear about Equestrian Canada/NCCP Instructor/Coaching Certification?  
\_\_\_\_\_

Why is it important to you to attain certification?  
\_\_\_\_\_

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian (if under 18 yrs)

\_\_\_\_\_  
Date