

## **Oregon High School Water Polo Committee**

PO Box 25284 Portland, Oregon 97298

www.OregonWaterPolo.Org FEIN: 93-0992459 – 501(c)(3)

Official governing body of High School Water Polo in Oregon

# **Coaching Intern and New Referee Program**

To help enhance the sport of water polo within Oregon, OHSWP members voted to create a training avenue and incentive to develop new coaches and officials.

As such the following changes occurred with this legislation:

- 1. Annual OHWPC membership fee increased from \$100 to \$200 per school beginning with 2017 season.
- 2. School is eligible for a reduced membership fee of \$100 in the preceding year if new Coaching Intern / OWPOA Referee completes the entire season of previous year. Reduced membership fee of \$100 is available for up to two (2) years, per coaching intern and OWPOA referee.
- 3. The "Team Bench" may now have the following present at contests: head coach, assistant coach, <u>coaching intern</u> and team manager, for a total of four (4) individuals other than rostered athletes.
- 4. The new Coaching Intern and OWPOA Referee must register each season for the program through the OHWPC.

#### Qualifications

- 1. Must have graduated high school and be at least 17-years of age.
- 2. May not have been a registered coach or referee previously in the state of Oregon.
- 3. Must have approval of a registered OHSWP school program administer or coach.
- 4. Complete the following application and return as indicated.
- 5. Coaching Intern / OWPOA Referee must complete the required training and certifications to be eligible. Visit the coaching/officials pages at OregonWaterPolo.org for details.



# **COACHING INTERN / REFEREE APPLICATION**

### **Qualifications**

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- 6. Apply for (check one):
  - O Coaching Intern
  - O OWPOA Official

APPLICANT INFORMATION		
Name:		
Email:		Phone:
Current address:		
City:	State:	ZIP Code:
Graduation Year:	High School:	
SPONSORING SCHOOL INFORMATION		
Sponsoring School:		
Coach:		
E-mail:		Phone:
Address:		
City:	State:	ZIP Code:
SIGNATURES		
I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.		
Signature of applicant:		Date:
Signature of Sponsor:		Date: