



National Coaches Application

Name Roberto Dixon

Address 497 Melville Ave

City Marina Zip 93933

Home Phone () _____ Cell Phone (831) 524-4017

Work Phone () _____

Email dixwrest@aol.com

Coaching Certification: (Circle One) **Silver**--Bronze (Must be at least a Bronze when application is submitted.)

What year did you receive your certification? 1994

Which Association do you volunteer in SCVWA

Club or High School Affiliation Monterey Peninsula Wrestling Club

What level of competition are you comfortable with:
(Circle One)

Kids-**Cadets**-**Juniors**-University-Open

Please Attach a Letter Of Recommendation From Your Association Chairman.
(Must be submitted with application.)

Thank you for applying. Upon receipt of this application you will be automatically placed in the coaching pool.

Please send to: (Boys)
Greg Chappel
1568 Windsor Way
Brentwood, CA 94513
gchappel@att.net
831-595—6008

Please send to: (Girls)
Mike Duran
14881 Stockdale
Baldwin Park Ca 91706
bpw1@hotmail.com
(626) 536-3577

