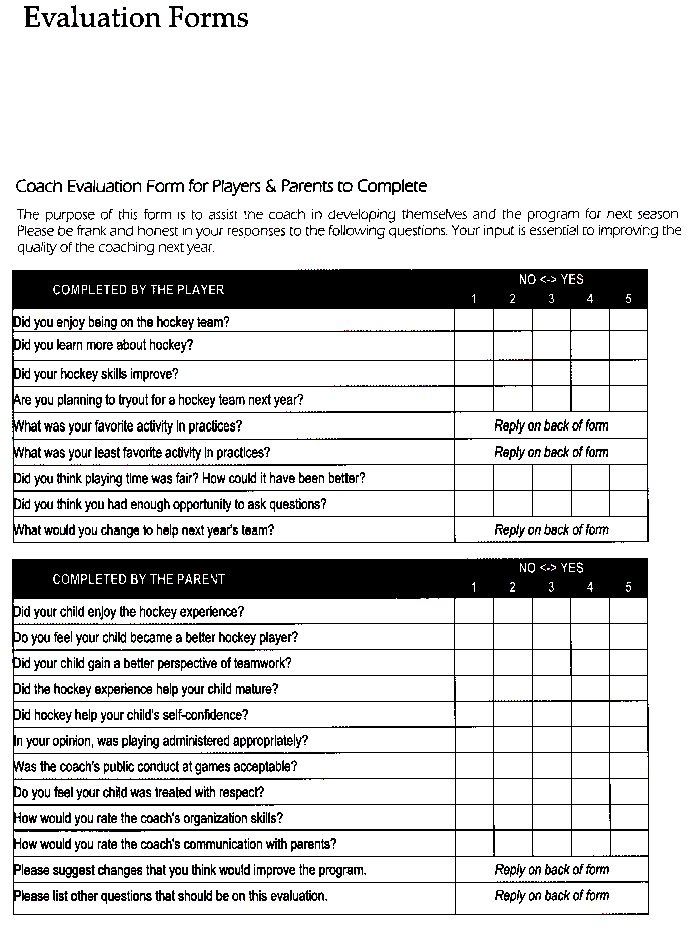
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***SLMHA Coach Evaluation***

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| --- | --- |
| ***Team:*** |  |
|  |  |
| ***Submitted By:*** |  |



**Submit to SLMHA before March 15**

Lobby Box or [shallowlakehockey@gmail.com](mailto:shallowlakehockey@gmail.com)