



# United States Fencing Coaches Association

Member, National Collegiate Athletic Association (NCAA)  
Member, Academie D'Armes International (AAI)

Training Certification Collaboration

## Hosting USFCA Coaches Clinics Guide

Revised March 2017

The U.S. Fencing Coaches Association is dedicated to the growth and development of better fencing through better coaching by improving the quality of fencing instruction and supporting fencing coaches in the United States.



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## How to Host a USFCA Coaching Clinic

**Why host a USFCA Clinic?** It will benefit your fencers, parents and assistant coaches. It is a great opportunity to exchange knowledge with other coaches, and, if certification practicals are offered, will allow local coaches to be tested with less expense. Your club can generate funds, publicity and develop a relationship with local businesses. It supports your professional coaches' organization. In short, hosting a USFCA clinic is one of the major ways that you, as a member coach, can help with the teaching of the theory and practice of our sport. The USFCA wants to help you help our coaches grow in their knowledge, certify coaches at the levels they deserve, and to help your organization or club host a financially successful event.

**Types of Clinics.** The USFCA is committed to preparing its member coaches to not only teach the theory and practice of fencing, but also to all other aspects that impact the teaching and coaching of our sport. So, while the preparation of coaches to take certification exams is a major part of our clinic program, we also encourage clinics to teach beginning coaches basic fencing technique and theory, to hold clinics on starting and managing club programs, coaching youth, high school, and collegiate programs, and such topics as strength and conditioning training, sports medicine, and sports psychology. If there is a clinic that coaches can use, we will consider it.

**Planning is critical.** Plan at least 6 months in advance. Contact nearby division officers to avoid conflicts and coordinate with the coaches who will be your attendees and your presenters months in advance to ensure good attendance. Schedule the clinics on weekends, which will allow coaches that work weekdays to travel and attend your clinics. If you plan to give certification exams, remember that you will need coaches who are current USFCA members and have been certified to give the exams. In addition you will need 2 Prevots or 1 Master for a Moniteur exam, 2 Masters for a Prevot exam, and 3 Masters for a Masters exam. Contact these coaches well in advance so your examination boards will be complete for those who are taking the exams.

**Gaining USFCA sanction.** To gain official USFCA sanction, you must follow the following steps:

- 1) Download all the forms on the USFCA website under the menu "Clinic Hosting".
- 2) Fill out the application form and submit it to the address at the bottom of the form. Please note that you must fill it out completely, including such things as the curriculum and schedule of events for the clinic, information for the presenters, and, if you intend to do certification testing, a list of examiners.
- 3) If you need help in putting together any information on the form, or desire help in putting a clinic together, please contact the Chair of the Professional Development Committee and/or your Regional VP (contact list may be found on the USFCA Website). If you need help in finding presenters or examiners, we have a list of coaches willing to do that and will help you find what you need. Work with the Professional Development Committee (PDC) or your Regional VP to help you with any other matters that may come up, such as how to run a clinic, hotels, transportation, food, advertising, etc.

- 4) When you have completed the application form, please submit it a minimum of two months before the clinic date to the address on the form. The PDC Chair will make sure it is complete, have the Professional Development Committee examine the curriculum and the CAB approve the examiners, if appropriate, and then, if it meets our specifications, approve it and notify you of that fact. Also the appropriate Regional Vice President will be notified. Send us any advertising links, such as AskFred.net, so we may put the most complete information and we will put it on the USFCA Web site to help you get the best attendance possible.
- 5) If you make any significant changes to the clinic as approved, such as an additional day, a change of curriculum, a new presenter, or a cancellation of the clinic, you **MUST** notify both your regional VP and the chair of the Professional Development Committee by email or letter. Any changes that, in our opinion, would affect the value of the clinic, can result in the rescinding of USFCA sanction.
- 6) When available, we will provide the host of your clinic with USFCA signage and other items, such as t-shirts, that may be sold or distributed at your clinic. Unused merchandise and signage will be returned to the USFCA after the clinic.
- 7) If you are doing testing, be sure and download the necessary forms under the “Certification” menu on the USFCA web site. Remember that the CAB must certify all examiners and that written tests must be passed before practicals can be given. Make sure you are familiar with all of the information about testing. **Make it clear** in all your publicity that the attendees must take and pass the online written USFCA Moniteur or Prevot exam before they get to the clinic. Practical exams will not be given if they have not passed the written exam. Attendees should bring with them proof of USFCA membership and email confirmation that they have passed the online exam and [paid online for the practical exam\(s\)](#). [No exam fees are to be paid to the clinic organizers since this is always done online at the USFCA website.](#)
- 8) At the end of your clinic, you must give the participants the “Participant Clinic Evaluation Form”, which you should have downloaded in #1. Along with the Organizers’ Evaluation Form, these must be submitted to the PDC Chair at the address on the form within two weeks of the conclusion of the clinic.
- 9) If participants need/want a certificate of participation, please submit their names and contact information on the Organizers’ Evaluation Form. The Secretary will record their information and send them the certificate.
- 10) All paperwork associated with any exams given must be sent to the CAB as soon as possible.

Thank you for hosting a USFCA clinic and please contact Vinnie Bradford with any questions at [vincent.bradford@gmail.com](mailto:vincent.bradford@gmail.com)

**or**

Vincent Bradford  
2919 6th Ave.  
Ft. Worth Texas 76110

[vincent.bradford@gmail.com](mailto:vincent.bradford@gmail.com)

817-995-2535



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## USFCA Coaching Clinic Proposal Form

### Clinic Information:

USFCA Region:  
Clinic Name:

USA Fencing Division:

Clinic Date:

Weapon(s):

Clinic Location:

City:

State:

Zip:

Phone:

Fax:

Email:

Clinic Cost: USFCA Member: \_\_\_\_\_ Non-Member: \_\_\_\_\_

### Host (Organizer) Information:

Name of Fencing Organization: \_\_

Host Name:

Address:

City:

State:

Zip:

Phone:

Fax:

Contact Cell Phone:

Email:

=====

**Instructor Coach (USFCA Master or Prevot) Information:**

Name:

Address:

City:

State:

Zip:

Phone:

Fax:

Email:

Cell:

**2<sup>nd</sup> Instructor Coach (USFCA Master or Prevot) Information:**

Name:

Address:

City:

State:

Zip:

Phone:

Fax:

Email:

Cell:

**Non USFCA Presenter Information:**

Name:

Address:

City:

State:

Zip:

Phone:

Fax:

Email:

Cell:

Bio:

### Schedule of Events:

It is **required** to attach a proposed schedule of events to the application or fill in the area below. **The clinic will only be sanctioned with an acceptable and complete schedule of events.**

Curriculum outline of the daily schedule must include specific activities for the various sessions and weapons. Each instructors' responsibilities must be briefly outlined.

### Will certification testing be a part of the clinic?



Yes

No

The USFCA Certification and Accreditation Committee (CAB) must certify examiners. See 'Certification' section of the USFCA Website for forms and procedures for testing. **Please note on the form if you are listed on the USFCA website as a Certified examiner or a Head Examiner (able to run the exam).**

Examiner #1

Name:

Address:

City:

State:

Zip:

Phone:

Fax:

Email:

Cell:

Certification Level (Master, Prevot): \_\_\_\_\_ Head Examiner \_\_\_\_\_ Certified Examiner \_\_\_\_\_

Examiner #2

Name:

Address:

City:

State:

Zip:

Phone:

Fax:

Email:

Cell:

Certification Level (Master, Prevot): \_\_\_\_\_ Head Examiner \_\_\_\_\_ Certified Examiner \_\_\_\_\_

Examiner #3

Name:

Address:

City:

State:

Zip:

Phone:

Fax:

Email:

Cell:

Certification Level (Master, Prevot): \_\_\_\_\_ Head Examiner \_\_\_\_\_ Certified Examiner \_\_\_\_\_

**Organizing Staff & Areas of Responsibilities:**

Name

Responsibility

**Clinic Services:**

- Accommodation: please attach a list of nearby hotels and negotiated rates if applicable.
- Ground Transportation:
  
- On-site Food Services:

**Other activities (such as armory clinic, parents hour, etc):**

**Other information you wish to share:**



**“By signing this application, I certify that if this clinic is approved by the USFCA, I will return the Organizer’s Evaluation Form and Participant Evaluation Forms for every attendee to the address below within two weeks of the date of the clinic. I also certify that all paperwork associated with testing for certifications will be sent to the address specified in the CAB testing materials as soon as possible as indicated in the CAB materials for testing. Further, I will be held responsible for sending all proceeds due to the USFCA for all USFCA merchandise sold, returning unsold merchandise, and any other items provided by the USFCA to the USFCA.**

**Contract Name:** \_\_\_\_\_

**Contact Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Return this form and attachments to:**

Vincent Bradford  
2919 6th Ave.  
Ft. Worth TX 76110

**Or electronically to:**

Email: [vincent.bradford@gmail.com](mailto:vincent.bradford@gmail.com)

(revised 03/2017)



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## Organizers' Evaluation Form

### Clinic Information:

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Site: \_\_\_\_\_  
Club City State Zip

Topic of Clinic: \_\_\_\_\_  
\_\_\_\_\_

Number of Participants:

Members: \_\_\_\_\_ Non-Members: \_\_\_\_\_

Number of Exams given:

Moniteur: Foil \_\_\_\_\_ Epee \_\_\_\_\_ Sabre \_\_\_\_\_  
Prevot: Foil \_\_\_\_\_ Epee \_\_\_\_\_ Sabre \_\_\_\_\_ Three Weapon \_\_\_\_\_  
Master: Foil \_\_\_\_\_ Epee \_\_\_\_\_ Sabre \_\_\_\_\_ Three Weapon \_\_\_\_\_

**Evaluation of the Clinic:** In a few paragraphs, please evaluate your clinic. Do you feel it was successful? Did it live up to your expectations? Why or why not? Were there any problems? What were the strengths and weaknesses and would you change anything for the next time. We will use this information to create a database to help others plan clinics.

### Paperwork wrap-up:

MACROBUTTON HTMLDirect  Participant Clinic Evaluation Forms filled out and attached.

MACROBUTTON HTMLDirect  Organizers' Evaluation Form filled out.

MACROBUTTON HTMLDirect  Exam paperwork filled out and submitted to CAB. (see CAB forms for address)

MACROBUTTON HTMLDirect  Proceeds from USFCA merchandise and unsold merchandise submitted to USFCA, if applicable.

**The following need Certification of Attendance certificates:**

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
Email: \_\_\_\_\_

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
Email: \_\_\_\_\_

(Add lines as necessary or attach list)

Thank you for hosting a USFCA clinic

**Contact Name:** \_\_\_\_\_

**Contact Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Return this form and attachments to:**

Vincent Bradford  
2919 6th Ave.  
Ft. Worth, TX 76110

**Or electronically to:**

Email: vincent.bradford@gmail.com

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