**TMHA - Tofield Minor Hockey Association - MVP**

**Most Valuable Person of the Month**

**Submission Form**

Date of Submission:

Name of Team:

Name of Individual: Accomplishment:

Date: Group (age/division):

Level in Association:

Other Information: (attach additional sheet if needed, maximum 100 words and/ or Picture)

Name of person(s) making submission:

Address: City:

Postal Code:

Phone Number (business): (home)

If accepted, I give permission to the Tofield Minor Hockey Executive, MVP Selection Committee, to post a photograph on the THM website and the Tofield Mercury of the successful nominee.

Submitting Person’s Signature Date:

Procedures:

1. All submissions must be accompanied by an appropriate photograph of the candidate(s).

2. All persons in the pictures must be identified by name.

3. Pictures must be of good quality and suitable to make a reproduction.

**Please submit to level director. Director will notify selection committee.**