

DIVISION:

TEAM NAME:

Example: Bisons, Kings, Cougars etc.



U7, U9, U11, U13, U15, U16, U18

CATEGORY:

AA, A, B, C, Female

| TEAM OFFICIAL | FIRST NAME | LAST NAME | BIRTHDATE mm/dd/yy | ADDRESS | CELL PHONE# | CHILD'S NAME (on this team) | |
|------------------|---|--------------------------|-----------------------|---|---------------|--------------------------------|--|
| Head Coach | | | | | | | |
| | | | | EMAIL | | | |
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| | | | | EMAIL | | | |
| | | | | I | | | |
| | | | | EMAIL | EMAIL | | |
| | Eve | <u>ry</u> team must have | one person listed who | ant Coach, Volunteer, Stick Person has taken the Hockey Canada bench and/or ice with the team (ex | Safety course | | |
| TE | TEAM OFFICIAL (who filled out this form): | | | F MAH. | E-MAIL: | | |

Anyone over 18 yrs old and listed on this form MUST provide an <u>original</u> vulnerable sector Criminal Record Check by Nov. 15.

No scans, faxes, pictures etc., <u>must</u> be the original and dated after April 01/2024.