

North Metro Girls Hockey League Officials Information Sheet

The following information will be used to update our Team/Association/League database as we all work together to maximize the communication within female hockey in Ontario.

Name _____

Address _____

City _____ Postal Code _____

Hm # _____ Cell # _____

Wk # _____ Fax # _____

Email #1 _____

Email #2 _____

OWHA/OMHA/GTHL # _____ Level _____

Supervisors Name _____

Please provide the following information for the purposes of avoiding scheduling conflicts.

Affiliated Team/Organization _____

Please check if applicable: Player _____ Coach _____ Trainer _____ Manager _____

Parent of Player _____ Name of Team/Division _____

Information on this form will be used for NMGHL purposes. From time to time, the NMGHL may use or disclose to third parties, the personal information collected on this form for the purposes of tournament scheduling, league scheduling.

Sign

Date

Return completed form to your assignor or fax to NMGHL at 1-866-341-5576 or 416-753-4100