



APPLICATION FOR MEMBERSHIP SPRUCE GROVE MINOR HOCKEY ASSOCIATION

To be completed and returned the Spruce Grove Minor Hockey Association

Application for membership of: _____

Application for membership must be provided along with 2 letters' of references and the application fee which may be located on our website at www.sgmha.ca. Application does not guarantee membership; please review our By-laws and Policy and Procedures for further information.

Please submit this application and the above requirements to Box 3666, Spruce Grove, AB

Part 1

APPLICATION FOR MEMBERSHIP PERSONAL INFORMATION

Legal name of Applicant: _____

Prior Surname: (if applicable) _____

Current Permanent Address: _____

Prior Address: (if less than 10 years)

Home Telephone: _____

Cell Phone: _____

Business Phone: _____
(if applicable)

Volunteer Positions held in the last 10 years:

Association: _____
Town/City: _____
Contact Name: _____
Contact Number: _____

Association: _____
Town/City: _____
Contac Name: _____
Contact Number: _____

Association: _____
Town/City: _____
Contact Name: _____
Contact Number: _____

Association: _____
Town/City: _____
Contac Name: _____
Contact Number: _____

Please attach additional positions held if necessary

I, _____, an applicant for membership in Spruce Grove Minor Hockey Association, hereby permit the SGMHA to obtain references from your organization (noted above) to disclose reference information to SGMHA, for the purpose of confirming my prior volunteer service and certify my conduct as a volunteer and no other purpose.

