



# HOCKEY NL

## MEMBERSHIP APPLICATION

In accordance Hockey NL By-Law 2, we hereby make application for membership in Hockey NL for the 2024-2025 season. **MEMBERSHIP YEAR IS FROM SEPTEMBER 1 TO AUGUST 31.**

Full name of **applicant** \_\_\_\_\_  
(League, Team or Association)

If this is an application from a Team, give full name of League or Association in which the team plays. \_\_\_\_\_  
(League/Association, if applicable)

**FULL MAILING ADDRESS** of Applicant's President/Chair/GM \_\_\_\_\_  
Name and Title (please print)

Address \_\_\_\_\_ Town \_\_\_\_\_ Postal Code \_\_\_\_\_

Email Address (MANDATORY) \_\_\_\_\_ Telephone Number \_\_\_\_\_

**If a Minor Hockey Association with a female team (s), the name and email of your appointed or elected voting representative:** \_\_\_\_\_

As a member of Hockey NL, we agree to comply with and adhere to all the requirements of Corporation's governing documents as the governing body of all organized amateur hockey in the province of Newfoundland & Labrador.

Signed on behalf of the applicant (**President & Secretary**):

\_\_\_\_\_  
 Name (please print)                      Signature                      Position

\_\_\_\_\_  
 Name (please print)                      Signature                      Position

**Date of Application:** \_\_\_\_\_

### FOR OFFICE USE ONLY

This application has been accepted for the period ending \_\_\_\_\_.

Signed on behalf of H.N.L. \_\_\_\_\_  
Executive Director                      Date

Membership Received: \_\_\_\_\_ Receipt #: \_\_\_\_\_

Membership Form Sent: \_\_\_\_\_