



**NORTH HALTON GIRLS HOCKEY ASSOCIATION**

260 Guelph Street, P.O. Box 74056, Georgetown, ON L7G 4B1  
Email: info@nhgha.com Website: www.nhgha.com

## Volunteer Reimbursement Form

Please note, for individuals volunteering with our youth teams, a police check with Vulnerable Sector Screening must be provided to our administrator at nhgha.info@gmail.com before a reimbursement cheque will be issued. Police checks are valid for three years.

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Division:**

- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> FUNdamentals | <input type="checkbox"/> Peewee              |
| <input type="checkbox"/> Tyke         | <input type="checkbox"/> Bantam              |
| <input type="checkbox"/> Novice       | <input type="checkbox"/> Midget/Intermediate |
| <input type="checkbox"/> Atom         | <input type="checkbox"/> Senior              |

Head Coach's Name \_\_\_\_\_

- House League      Team \_\_\_\_\_ (1, 2, 3, 4)
- Representative      Category \_\_\_\_\_ (AA, A, BB, B)

**Copies of your receipt (proof of payment) and certificate/wallet card (proof of completion) must accompany this form.**

<u>Course</u>	<u>Amount</u>
Respect in Sport / Speak Out	_____
Trainer's Level (I or II) _____	_____
Coach (Coach Level, D1) _____	_____
Other _____	_____
<b>Total reimbursement request</b>	<b>=====</b>

**All volunteers**, please email this form, receipt(s) and certificate(s) to our administrator Carolyn Tegelaar at nhgha.info@gmail.com or mail them to the P.O. Box address above.

**Thank you for volunteering!**