

## **APPLICATION FOR NON-IMPORT STATUS**

Name of Player:		Date of Birth:		
Name of Parent(s):				
Contact Information: Parent 1. Phone: Parent 2: Phone:		e-mail: e-mail:		
Address:				
Ravens Teams/Programs Player has played on:  Team		Season		
Player (as appropriate) and Parecommittee work; team functions		ies within WGHA (e.g. Fall Cha	allenge Cup,	
Parent Name	Activ	ity	Season	
Player (as appropriate) and Pa	arent Leadership Activi	ties within WGHA (e.g. coachi	ing staff, chairing	
committee, Board member etc.)  Parent Name	Activity	Season		
1 arent Name	Activity	Season		
<ul> <li>agree to continue to de</li> <li>agree to continue to vo</li> <li>understand that we (I)</li> <li>understand that should wish to return to WGF</li> </ul>	emonstrate commitment to blunteer to help support V will be required to pay to dour/my daughter leave V	VGHA activities; he additional "out of town" regi WGHA to play for another Asso d an Import and be subject to the	ciation and then	
	Date:		Date:	
Name:		Name:		