

For the kids, For the game, For the fun of it!

## ÔÒÜV@@0E/QJÞÁÜÒQTÓWÜÙÒTÒÞVÁÔŠŒETÁØUÜT

## **Personal Information**

Name		
Address	City	
Postal Code	Phone Home	Work
Email Address		
Team		
	oach, Trainer	
Clinic Information		
Type L Police Check/Trainer/Coach/Speak Out	evel Cost \$	
Location	Date	
Receipt and copy of certification mu	st be attached	
Submit to WGMHA Treasurer Suite 100, RIM Park 2001 University Avenue East Waterloo, Ontario N2K 2K4		
OFFICE USE ONLY:		
Reimbursed \$	Cheque #	
Cheque Date		
Remarks:		