



LEAGUE CONTACT INFORMATION FORM

LEAGUE DETAILS

League Name _____ Start Date _____ End Date _____
MONTH MONTH
 Draft Number of Players _____ Team Based Number of Teams _____
LIST TEAM NAMES ON PAGE 2+3

PRESIDENT/CONVENOR

Name _____ Home (_____) - _____
 Address _____ Work (_____) - _____ ext _____
 City _____ Prov. ____ Postal Code _____ Fax (_____) - _____
 E-mail _____

VICE-PRESIDENT

Name _____ Home (_____) - _____
 Work _____ ext _____ Fax (_____) - _____
 E-mail _____

TREASURER

Name _____ Home (_____) - _____
 Work _____ ext _____ Fax (_____) - _____
 E-mail _____

SECRETARY

Name _____ Home (_____) - _____
 Work _____ ext _____ Fax (_____) - _____
 E-mail _____

TO BEST SERVE YOUR SPECIFIC NEEDS, PLEASE TAKE A MOMENT AND COMPLETE THE FOLLOWING

DOES YOUR LEAGUE HOST:
 Tournament(s) Yes No Tournament Name _____
 Date _____
 Banquet(s)/Socials Yes No Date _____
 Date _____
 Do you look for prizing options for your league? Yes No
 Who is your Referee Assignor (if applicable)? _____
 Which arena does your league play out of? _____

I CONSENT TO RECEIVE – All, Ice Chips, Hockey Hub, CHWC eletter, third party promotions.

CARHA HOCKEY REGISTERED PLAYERS ACKNOWLEDGE THAT THERE IS A RISK OF BEING INJURED WHEN PLAYING THE GAME OF HOCKEY.

The Canadian Adult Recreational Hockey Association (CARHA Hockey) is committed to protecting the privacy and confidentiality of your personal information in our possession and complying with applicable privacy laws in Canada, including the *Personal Information Protection and Electronic Documents Act*. In furtherance of this commitment, CARHA Hockey has adopted a Privacy Policy and appointed a Chief Privacy Officer who is accountable for our compliance with applicable privacy laws and CARHA Hockey's Privacy Policy.

Please consider this notification of confirmation that the collection of personal information by CARHA Hockey is limited to that which is necessary for communications with you, membership registration organizing hockey tournaments as the official national body for recreational hockey in Canada, determining if our products and services, or those of our partners, meet your needs, offering and providing our products and services, or those of our partners, that may be of interest to you, collecting monies owing to CARHA Hockey or permitting CARHA Hockey to pursue available remedies or limit any damages it may sustain, complying with all applicable laws or for other purposes that are disclosed to you before or at the time the personal information is collected. Unless required by law, we will obtain your consent before using or disclosing your personal information for a purpose not previously identified.

A complete copy of CARHA Hockey's Privacy Policy and instructions for unsubscribing from our mailing lists and/or informing us of your preferences for the use and disclosure of your personal information can be found on our website at www.carhahockey.ca or obtained by writing to us at the address below.

For further information about CARHA Hockey's Privacy Policy, to address any concerns you have, to review or verify your personal information in our control or to find out how we have used it or to whom we have disclosed it, please email CARHA Hockey's Chief Privacy Officer - privacy@carhahockey.ca or contact us in writing at the address below.



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hockey@carhahockey.ca

carhahockey.ca

LEAGUE TEAMS (PAGE 2)

1) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
2) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
3) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
4) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
5) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
6) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
7) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
8) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
9) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
10) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
11) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
12) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____

LEAGUE TEAMS (PAGE 3)

13) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
14) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
15) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
16) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
17) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
18) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
19) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
20) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
21) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
22) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
23) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____
24) TEAM _____	Rep Name _____		
Phone _____	E-mail _____	DOB _____	
Address _____	City _____	Prov. _____	Postal Code _____