

Board of Directors Application/Nomination Form

McKenzie County Hockey Club (MCHC)

Applicant Name: _____

Address: _____

Phone: _____

Email: _____

Applicant

Photo

Current MCHC Member? _____ (yes or no)

Numer of years involved with MCHC? _____

Do you have children in hockey? _____

Age Groups? _____

Please provide a short bio to describe yourself:

Why are you running for a MCHC Board of Directors position?

What other boards, committees, and/or organizations are you involved with?

Please highlight one specific topic related to the MCHC program that you are passionate about strengthening or making better:

Applicant Signature: _____

Date: _____