

Mooretown Lady Flags Girls Hockey Association

Headquartered at Mooretown Sports Complex 1166 Emily St., Mooretown, ON, N0N1G0 www.mooretownladyflags.ca



Volunteer Cheque Form – 2022-23 Season

Player Last Name: Player First Name: Player Address: Contact Email: Contact Phone: Players Parent Name (1): Players Parent Name (2): Player Date of Birth: Player Division (U9, U11, etc.): Player Team (HL, C, etc.): Siblings:						
			Name:		Team:	
			Name:		Team:	
			Name: Team:		Team:	
			Following completion	n of six (6) hours of volunteeri	ng, do you want your cheque: (please circle):	
			r onouning completion	SHREDDED	RETURNED	
			FOR EXECUTIVE US	E ONLY: Cheque submitted: O	ctober, 2022.	
			Date:		Time:	
			Description of Volun	teer Time:		
Executive signature th	at cheque was returned or shred	lded.				
Signature:	Date:					