



Mooretown Lady Flags Girls Hockey Association

Headquartered at Mooretown Sports Complex

1166 Emily St., Mooretown, ON, N0N1M0

www.mooretownladyflags.ca



Volunteer/Jersey Cheque Form – 2025-26 Season

Player Name _____

Player Date of Birth _____

Player Address _____

Phone Contact _____

Email Contact _____

Parent/Guardian 1 _____

Parent/Guardian 2 _____

Player Division (U9, U11, etc.) _____

Player Team (A, BB, etc.) _____

Siblings:

Name: _____ Team: _____

Name: _____ Team: _____

Name: _____ Team: _____

Following completion of eight (8) hours of volunteering, do you want your cheque: (please check): ☐ SHREDDED. ☐ RETURNED

Jersey's returned in good condition and verified by coach and Director of Equipment:

FOR EXECUTIVE USE ONLY: Cheque submitted: October ____, 2025.

Date: _____ Time: _____

Description of Volunteer Time:

Executive signature that cheque was returned or shredded.

Signature: _____ Date: _____