



Centre Wellington Minor Hockey Association  
Nomination Form for Appointed Positions

2020/2021 Nomination Form

Name \_\_\_\_\_

Position \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Contact  
Phone \_\_\_\_\_

Contact  
Email \_\_\_\_\_

Please return applications to the Administrator, Brandy Swain – [brandylswain@gmail.com](mailto:brandylswain@gmail.com) on or before August 30, 2020.

Received by: \_\_\_\_\_

Date: \_\_\_\_\_