2011-2012 TEAM ROSTER SHEET

Please submit to your Council Director

Team Name: _____

(Association Name, Team Name, Division, Category)

Sweater #	Player's Name	Birth Date (YY/MM/DD)

Staff Member's Name	Position	Certification #'s (CN, HN, BN, TN, IN)

The Northern Ontario Hockey Association is committed to respecting and protecting the privacy of our Members, their Associations, individual members, their families and our employees. The information collected on this form will be used for the sole purpose of administering the Rules, Regulations and By Laws of the NOHA/OHF/Hockey Canada and/or for the purpose of registering the individual in the program for which they have enrolled and may be used to provide them with the information necessary for participation.