

OWATONNA YOUTH HOCKEY ASSOCIATION
Board of Directors Intent Form
Board Term: July 1, 2024 – June 30, 2027

Name:

Phone: Cell:

E-Mail:

Children Currently in Program (Age/Team)

Prior Board Positions held with OYHA or Other Organizations

What strengths/skill sets do you bring to the board?

What are your reasons/goals for desiring a board position?

Other comments?

By completing this application, I understand that OYHA is a working board and I will be expected to be on a minimum of three committees and attend all board meetings. Furthermore, I understand the expectations set forth in the Owatonna Youth Hockey Association Operating Guide, as published on www.owatonnahockey.com. This email this form to Mary Kelvie at oyha.adm.director@gmail.com by April 4, 2024.