

**SANTA FE HOCKEY ASSOCIATION
VOLUNTEER INTEREST FORM**

FULL NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____

PHONE: _____ ALT PHONE: _____

MEMBER OF SFHA ASSOCIATION SINCE: _____

CURRENT USA HOCKEY BACKGROUND CHECK: YES () NO()

CURRENT SAFESPORT CERTIFICATION: YES() NO()

DATE OF CERTIFICATION: _____

AREAS OF INTEREST:

BOARD OF DIRECTORS (Please complete attached page 2)

BOARD COMMITTEE

FUNDRAISING

COMMUNITY RELATIONS

INTERNAL COMMUNICATIONS

DISCIPLINARY COMMITTEE

EVENT PLANNING

SOCIAL MEDIA

OTHER _____

TEAM MANAGER

GAME DAY VOLUNTEER (Scorekeeper, Time Clock, Penalty Box)

I hereby agree to abide by the governing policies, rules and regulations of USA Hockey and Santa Fe Hockey Association.

SIGNED: _____ DATE: _____

**SANTA FE HOCKEY ASSOCIATION
BOARD INTEREST FORM**

FULL NAME: _____

BOARD CANDIDATE SECTION: (Please complete for Board positions)

PLEASE CHECK AREAS OF INTEREST AS A BOARD MEMBER:

Fundraising () Marketing and PR () Social Media () Compliance () Finance ()

Scheduling () Disciplinary () Player Development () Other () _____

PLEASE DESCRIBE YOUR BACKGROUND AND QUALIFICATIONS IN RELATIONSHIP TO A BOARD POSITION WITH SFHA (Attach Additional Sheet if Required):

EXPLAIN WHY YOU ARE INTERESTED IN SERVING ON THE BOARD OF SFHA:

PLEASE PROVIDE ANY OTHER INFORMATION THAT MAY BE USEFUL IN CONSIDERING YOU AS A BOARD CANDIDATE:

I acknowledge that I have read and understand the attached description of the role of the Board of Directors and the role and responsibilities of individual Board Members. These roles and responsibilities are more fully described in the Association ByLaws. I hereby agree to abide by the governing policies, rules and regulations of USA Hockey and Santa Fe Hockey Association.

SIGNED: _____ DATE: _____