



FEMALE LEAGUE REGISTRATION FORM 2026-2027 SEASON

This form is only for LEAGUES. Minor Hockey Associations must use the Association Registration Form

LEAGUE NAME: _____

ADDRESS: Street/Box: _____ **City/Town:** _____

Postal Code: _____ **Website:** _____

PRESIDENT: _____ **Telephone:** _____

ADDRESS: Street/Box: _____ **City/Town:** _____

Postal Code: _____ **Email:** _____

REGISTRAR: _____ **Telephone:** _____

ADDRESS: Street/Box: _____ **City/Town:** _____

Postal Code: _____ **Email:** _____

COORDINATOR OF OFFICIALS: _____ **Phone:** _____

Email: _____

OTHER EXECUTIVE (Please List):

Name: _____ **Position:** _____ **Email:** _____

Name: _____ **Position:** _____ **Email:** _____

Name: _____ **Position:** _____ **Email:** _____

League Membership Fee: \$25.00

Payment Notice: You will receive an invoice via Quickbooks once this form is processed.

PROVINCIAL LEADER IN SPORT EXCELLENCE.