

# ***Nepean Girls Hockey Association Certification Reimbursement Claim Form For Trainer or Coach ONLY***

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## ***PERSONAL INFORMATION:***

Name \_\_\_\_\_  
Last Name First Name

Address \_\_\_\_\_ City \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone \_\_\_\_\_  
Home Work

Email Address \_\_\_\_\_

Team \_\_\_\_\_

Position on team \_\_\_\_\_  
(Coach, Assistant Coach, Trainer)

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## ***CLINIC INFORMATION:***

Type \_\_\_\_\_ Level \_\_\_\_\_ Cost \$ \_\_\_\_\_  
(Trainer or Coach!)

Location \_\_\_\_\_ Date \_\_\_\_\_

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***Receipt and copy of certification must be attached***

### ***Submit to NGHA Registrar***

Joanne Erbach  
19 Wycliffe Street  
Ottawa ON K2G 5M1  
tel: 613-727-3564  
email: registration@ngha.ca

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## ***OFFICE USE ONLY:***

Reimbursed \$ \_\_\_\_\_ Cheque # \_\_\_\_\_ Cheque Date \_\_\_\_\_

Remarks: