



**CENTRAL  
FLORIDA  
HOCKEY CLUB**

## **Board Nominee Questionnaire**

*Thank you for your interest in serving Central Florida Hockey Club. Please fill out the entire questionnaire below. Once completed, please send application to [centralfloridahockeyclub@gmail.com](mailto:centralfloridahockeyclub@gmail.com) with the subject line "Board Application – Applicants Full Name".*

Name \_\_\_\_\_

Address \_\_\_\_\_

City, St, Zip \_\_\_\_\_

Telephone \_\_\_\_\_

E Mail \_\_\_\_\_

1. How long have you and/or your children been involved in youth hockey and at what levels (house, travel, etc.)?

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2. Have you been involved with other youth activities?

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3. Have you held any leadership position with any hockey, another youth sport, or civic organizations? If so, please tell us about your responsibilities and/or achievements in these positions.

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4. What leadership qualities, strengths, expertise, and professional or job related skills or experiences do you see as primary contributions or areas of service you could offer as an OYHA Board Member?

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5. How many hours per week would you be able to contribute to Board activities?

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8. What do you see as strengths of OYHA and future goals?

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9. Where do you see the need for improvement with the club?

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10. If elected, what areas or problems are of special interest or concern to you?

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Additional comments that we should consider:

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I certify that all information given by me in this application is true and correct to the best of my knowledge. I understand that false or misleading statements made by me or consequential omissions of any kind in the application process are significant cause for my not being accepted as a volunteer/employee or for my dismissal no matter when discovered.

In consideration of the evaluation of this application by OYHA and/or its member programs, I HEREBY WAIVE, RELEASE AND DISCHARGE OYHA, all its member programs, all employees, organizations and individuals, and any other persons or entities from liability for damages and losses of whatever kind or nature, except liability for willful or intentional acts or punitive damages, that may result from compliance or attempts to comply with this authorization.

Signature \_\_\_\_\_ Date \_\_\_\_\_