



Iron Range Hockey Association  
P.O. Box 105  
Negaunee, MI 49866  
www.ironrangehockey.com

## TIMEKEEPER INFORMATION FORM

DATE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CELL PHONE \_\_\_\_\_  
CITY \_\_\_\_\_ EMAIL \_\_\_\_\_  
YOUR TEAM NAME \_\_\_\_\_

### TEAM DIVISION

Rank in preference order (1, 2, 3):

MITE I \_\_\_\_\_ II \_\_\_\_\_ BANTAM \_\_\_\_\_  
SQUIRT \_\_\_\_\_ MIDGET \_\_\_\_\_  
PEEWEE \_\_\_\_\_

### PLEASE INDICATE TIMEKEEPING YEARS OF EXPERIENCE:

I certify that the answers in this application and other information submitted are true to the best of my knowledge. I realize that all information furnished by me is important and that any misrepresentation of facts shall constitute cause for dismissal regardless of when discovered by IRHA. I authorize all individuals and agencies both public and private to release information regarding me as referenced in this application to IRHA on a confidential basis.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

For Iron Range Hockey Use Only:

TEAM: \_\_\_\_\_

Approved By: \_\_\_\_\_ Denied By: \_\_\_\_\_ Date: \_\_\_\_\_