



NOMINATION FORM

ELIGIBILITY

• Must be Indigenous

• Must be between the age of 6-17

• Must be accompanied by a parent or guardian

SECTION I.

CHILD INFORMATION

Last Name _____ First Name _____ Middle Initial(s) _____

Date of Birth MM DD YY _____

Email Address _____

Address _____

City/Town _____ Postal Code _____

Phone Number _____ Alternate Phone _____

PARENT/GUARDIAN INFORMATION

Last Name _____ First Name _____ Middle Initial(s) _____

Phone Number _____

Email Address _____

Mailing Address (if not the same) _____

SECTION II.

NOMINATOR INFORMATION

Last Name _____ First Name _____

Date Of Birth MM DD YY _____

Email Address _____

Address _____

City/Town _____ Postal Code _____

Phone Number _____ Alternate Phone _____





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SECTION III.

ATTITUDE & ADVERSITY:

To be successful in the sport of hockey one must maintain a positive attitude while going through adversity. Give an example of how maintaining a positive attitude has helped this child overcome a challenge in their lives.
(ATTACH SEPARATE SHEET OF PAPER IF NECESSARY)

SECTION IV.

ANYTHING ELSE that you would like to mention that has not been covered in this application.
(ATTACH SEPARATE SHEET OF PAPER IF NECESSARY)

NOMINATION FORMS MUST BE RECEIVED BY EMAIL NO LATER THAN THE DEADLINES SPECIFIED.

Please send to:
KYLEK@HOCKEYNORTH.CA

Subject:
THE NORTHERN PROJECT

GAME DATE

November 17
December 8
March 2
April 6

OPPONENT

vs Edmonton
vs Nashville
vs Minnesota
vs Edmonton

NOMINATION DEADLINE

November 1
November 9
February 8
March 8

