



CHL Membership Application

Name and contact information of person filling out application:

Name of association and location:

Website:

Are you a USA Hockey organization? YES NO

USAH # _____

Who is your USAH Affiliate and what year did they approve your organization?

Is your association in good standing with the affiliate and are there any current outstanding disciplinary issues that need to be declared?

What year did your organization begin fielding teams?

Who is your primary ice facility?

Please declare team name/mascot:

Please list the teams you are wanting to enter into the CHL (include age and level of play):



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Please list the names and phone numbers/email addresses of principal officers:

Why do you want to join the CHL?

Signature of authorized representative:

Printed name of authorized representative:

The Member Association application shall also be accompanied by the following:

1. A signed letter from local ice provider(s) to show sufficient availability of ice to support the association's current program as well as CHL league games.
2. A digital file of logos to be used on website
3. A \$100 per team deposit that will go towards league fees during the first season. (To be refunded if application is declined)

CHL Executive Board/Validation of information:

Date: _____

By: _____

Date Shared with Board of Directors: _____