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2011 Golden Horseshoe Touch Football Association
Team Registration Form

GHTFA
625 BAYSHORE BLVD.
Burlington, ON.
L7T 1S9
www.ghtfa.org

Team Information

Team Name :	
Previous League	

Insert last years GHTFA League or the League your team previously participated. If you are a new team to the Association please indicate the Level of which your team participated in other leagues.

2011 League

◯ A League ◯ B League ◯ C League

Primary Contact

Name :	
Street Address :	
City :	
Province :	
Postal Code :	
Home Phone :	
Work Phone :	
Cell Phone :	
Email Home :	
Email Work :	

Alternate Contact

Name :	
Street Address :	
City :	
Province :	
Postal Code :	
Home Phone :	
Work Phone :	
Cell Phone :	
Email Home :	
Email Work :	

All correspondence and Notifications to team are done through your e-mail address please enter a primary and secondary e-mail address for each team contact.

According to the By-Laws of the GHTFA each team must have at least 5 Certified Officials. Please indicate the individuals that play on your team that are certified Officials. Officials are paid for their service to the GHTFA and are required to perform on field official assignments throughout the year. If you have individuals how wish to take this year Officials Clinic and become certified, please indicate this. Level 2 and 3 Officials clinics maybe made available if the indiviuals reqesting have met the prerequisites for the GHTFA Officials Association.

First Name	Last Name	Official Level	Year	Telephone	E-mail Address	2011 Level 1 Clinic?	2011 Level 2 or 3 Clinic?

Scheduling Requests