



## Club Executive Information Form 20\_\_-20\_\_ Skate Canada – Western Ontario

<b>Club Name</b>	<b>Club #</b> _____
<b>Club Address</b>	_____ Street - P.O. Box
	_____ City <span style="float: right;">Postal Code</span>
<b>Electronic Mail</b>	Do you wish to receive your Club's mail electronically? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide email: _____
<b>Region</b>	_____
<b>Club Phone #</b>	(    )
<b>Club Fax #</b>	(    )
<b>Club E-mail #</b>	_____
<b>Club Operation</b>	Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/>

<b>Name of President:</b>	<b>Phone#</b>
	<b>Fax#</b>
	<b>Email:</b>
<b>Address:</b>	<b>City</b>
	<b>Postal Code</b>

<b>Name of Secretary:</b>	<b>Phone #</b>
	<b>Fax #</b>
	<b>Email:</b>
<b>Address:</b>	<b>City</b>
	<b>Postal Code</b>

<b>Name of Treasurer:</b>	<b>Phone #</b>
	<b>Fax#</b>
	<b>Email:</b>
<b>Address:</b>	<b>City</b>
	<b>Postal Code</b>

<b>Name of Test Chair:</b>	<b>Phone #</b>
	<b>Fax#</b>
	<b>Email:</b>
<b>Address:</b>	<b>City</b>
	<b>Postal Code</b>

<b>Name of Canskate Chair:</b>	<b>Phone #</b>
	<b>Fax#</b>
	<b>Email:</b>
<b>Address:</b>	<b>City</b>
	<b>Postal Code</b>

<b>Name of Synchro Chair:</b>	<b>Phone #</b>
	<b>Fax #</b>
	<b>Email:</b>
<b>Address:</b>	<b>City</b>
	<b>Postal Code</b>

<b>Name of Coaches Rep:</b>	<b>Phone #</b>
	<b>Fax#</b>
	<b>Email:</b>
<b>Address:</b>	<b>City</b>
	<b>Postal Code</b>

<b>Name of Region Council Rep:</b>	<b>Phone #</b>
	<b>Fax#</b>
	<b>Email:</b>
<b>Address:</b>	<b>City</b>
	<b>Postal Code</b>

**Please make 3 Copies for: (to be forwarded immediately after your Club's AGM)**

1. Skate Canada-Western Ontario office: 237 Consortium Court - London, Ontario N6E 2S8 or fax 519 686-0593 wos@execulink.com
2. Your Club's Region Chairperson/Secretary
3. Retain a copy for Club Records