

OWATONNA YOUTH HOCKEY ASSOCIATION  
Board of Directors Intent Form  
Board Term: July 1, 2026 – June 30, 2029

Name:

Phone: Cell:

E-Mail:

Children Currently in Program (Age/Team)

Prior Board Positions held with OYHA or Other Organizations

What strengths/skill sets do you bring to the board?

What are your reasons/goals for desiring a board position?

Other comments?

*By completing this application, I understand that OYHA is a working board and I will be expected to be on a minimum of three committees and attend all board meetings. Furthermore, I understand the expectations set forth in the Owatonna Youth Hockey Association Operating Guide, as published on [www.owatonnahockey.com](http://www.owatonnahockey.com). Email this form to Mary Kelvie at [oyha.adm.director@gmail.com](mailto:oyha.adm.director@gmail.com) by April 14, 2026.*