



**OMHA DEVELOPMENT PROGRAMS  
APPLICATION FOR CONVERSION/UPGRADE OF CERTIFICATION**

Submit to:

ONTARIO MINOR HOCKEY ASSOCIATION  
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Program (Check Applicable Areas)

COACH (NCCP) CONVERSION (\$10.00)

CHIP  COACH STREAM  DEVELOPMENT 1  DEVELOPMENT 2

OTHER (Specify)  \_\_\_\_\_

TRAINER (HTCP)

CONVERSION  (\$10.00) LEVEL II RENEWAL  (\$10.00) LEVEL II UPGRADE  (\$10.00)

PREVENTION SERVICES (Speak Out) CONVERSION  (\$5.00)

REPLACEMENT CARD (All Programs)  (\$5.00)

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

\_\_\_\_\_  
City/Town

\_\_\_\_\_  
Province

\_\_\_\_\_  
Postal Code

TELEPHONE: \_\_\_\_\_

\_\_\_\_\_  
Home

\_\_\_\_\_  
Business

\_\_\_\_\_  
Fax

DATE OF BIRTH: \_\_\_\_\_

(dd/mmm/yy)

E-MAIL ADDRESS: \_\_\_\_\_

CURRENT TEAM/ASSOCIATION: \_\_\_\_\_

CERTIFICATION DOCUMENTATION SUBMITTED (MUST BE INCLUDED WITH THIS APPLICATION):

Conversions:

PROGRAM CERTIFICATION FROM HOCKEY CANADA BRANCH/OHF MEMBER PARTNER

HTCP Upgrades/Renewals:

PROFESSIONAL CREDENTIAL (Per OMHA Manual Reg. 6.3 b)

STANDARD FIRST AID CERTIFICATION  WSIB Approved Service Provider: \_\_\_\_\_

PAYMENT METHOD: Cheque  Visa/Mastercard:

Credit Card #: \_\_\_\_\_ Security Code: \_\_\_\_\_ Expiry (MM/YY): \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_ Signature: \_\_\_\_\_