

**OREGON AMATEUR HOCKEY ASSOCIATION**  
**An Oregon Nonprofit Organization**  
**Application for NEW Member Association 2023**

**New Members:**

New requests for membership must be submitted by completing, signing, scanning and emailing the attached application for new membership. Supporting documentation (see below) must accompany the application for membership. All membership applications must be submitted to OSHA by the January meeting. The Board will vote on the application during the following Annual Meeting, or at a special meeting called for that purpose, if necessary.

**Fees (2022-2023) Season:**

There will not be any membership fee for new member association applications for the 2022-2023 season.

**OSHA Association Number:**

A OSHA Association Number (ORH xxxx) is assigned by USA Hockey when an Association is accepted as a OSHA member. That membership number must then be renewed each succeeding year by filing an OSHA membership renewal form with the OSHA Membership Committee Chairperson by the date set by the board in the first week of **April** to remain active.

**SUPPORTING DOCUMENTATION:** The documentation that must accompany this form depends on whether the Association is controlled by a for-profit or not-for-profit organization.

- **For-profit** organizations (e.g., commercial ice rinks) must submit:
  1. A copy of the business status from the Oregon Secretary of State
    - ([http://egov.sos.state.or.us/br/pkg\\_web\\_name\\_srch\\_inq.login](http://egov.sos.state.or.us/br/pkg_web_name_srch_inq.login))
    - (see example on page 6)
  2. **A copy of the Articles of Incorporation**
  3. A mission statement describing the amateur hockey programs that will register teams under this Association
  4. If Youth Programs: A copy of the signed “**USA HOCKEY MEMBER PROGRAM AGREEMENT TO ADOPT AND COMPLY WITH SAFESPORT PROGRAM**”
  5. Home Rink Information:
    - a. Name of rink
    - b. Location
    - c. Ownership
    - d. Program Ice Time Confirmation
- **Not-for-profit** organizations must submit:
  1. List of current officers and directors and their contact information
  2. A copy of the business status from the Oregon Secretary of State
    - ([http://egov.sos.state.or.us/br/pkg\\_web\\_name\\_srch\\_inq.login](http://egov.sos.state.or.us/br/pkg_web_name_srch_inq.login))
    - (see example on page 6)
  3. **A copy of the Articles of Incorporation**
  4. A copy of the current Bylaws/Rules/Guidebook
  5. IRS Tax Form 990
  6. If Youth Programs: A copy of the signed “**USA HOCKEY MEMBER PROGRAM AGREEMENT TO ADOPT AND COMPLY WITH SAFESPORT PROGRAM**”
  7. Home Rink Information:
    - a. Name of rink
    - b. Location
    - c. Ownership
    - d. Program Ice Time Confirmation

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This application must be fully completed by an authorized representative of your organization. Failure to provide the requested information may cause the application to be rejected. To be complete, the application must be signed and any appropriate fees and documentation included.

**Name of Association:** \_\_\_\_\_

**Name and Title of individual completing this form:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Name and location of home ice rink:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**OSHA Association Number(s):** (If more than one association number, list all)

- Association Number: \_\_\_\_\_ Youth \_\_\_\_\_ Adult \_\_\_\_\_ (check one)

Association Registrar: (Name) \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number \_\_\_\_\_

- Association Number: \_\_\_\_\_ Youth \_\_\_\_\_ Adult \_\_\_\_\_ (check one)

Association Registrar: (Name) \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number \_\_\_\_\_

- Association Number: \_\_\_\_\_ Youth \_\_\_\_\_ Adult \_\_\_\_\_ (check one)

Association Registrar: (Name) \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number \_\_\_\_\_

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**Name and Title of person authorized to vote within OSHA on behalf of Association**  
(normally the President):

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email: \_\_\_\_\_

**Association Webpage:** \_\_\_\_\_

**Association Tax Status Type (For Profit, Non-profit):** \_\_\_\_\_

Oregon Tax ID#: \_\_\_\_\_

**If For Profit, are there any Non-profit organizations within the association?**

\_\_\_\_\_ YES \_\_\_\_\_ NO

(if yes, please list) \_\_\_\_\_

**Sources of funding** (mark all that apply):

\_\_\_\_\_ Membership fees

\_\_\_\_\_ Fundraising/merchandise sales

\_\_\_\_\_ Donations/pledges

\_\_\_\_\_ Corporate sponsors

\_\_\_\_\_ Other (Specify: \_\_\_\_\_ )

Financial Standing with Oregon State Hockey Association:

Are all financial responsibilities with OSHA in good standing? \_\_\_\_\_ YES \_\_\_\_\_ NO

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**What month does your association negotiate contracts for the use of ice facilities?**

\_\_\_\_\_

**Meetings:** Does your association hold at least one annual meeting for all members with notice and agenda available at least 15 (fifteen) days prior to the meeting?

\_\_\_\_\_ YES \_\_\_\_\_ NO

**Bylaws:** Does your association distribute or make available the current Bylaws and Rules and Regulations to each of your members?

\_\_\_\_\_ YES \_\_\_\_\_ NO

**Youth Programs: Are the Youth programs in compliance with the following USA Hockey policies?:**

Compliance with SafeSport? \_\_\_\_\_ YES \_\_\_\_\_ NO

Compliance with American Developmental Model? \_\_\_\_\_ YES \_\_\_\_\_ NO

**Programs : Identify number of teams per level as appropriate:**

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Program	In-House (Teams/Players only play in their home rink)	Recreation/Travel (Teams travel to tournaments/ games outside of their home rink)	Tier II	Tier I	Other
8U Youth					
8U Girls					
10U Youth					
10U Girls					
12U Youth					
12U Girls					
14U Youth					
14U Girls					
16U Youth					
16U Girls					
18U Youth					
18U Girls					
Adult					
Disabled					

By signing this application manually or electronically, the undersigned representative of the applying Association named above, represents that the Association agrees to be bound by the Bylaws, Rules and Regulations of the Oregon State Hockey Association (OSHA) and USA Hockey and further, represents that he or she has been granted authority to so bind the applying Association.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_


**DEADLINE: ANNUAL FIRST QUARTER OSHA BOARD MEETING**  
 (usually January, see website: <https://www.oregonstatehockey.com> for actual date)

# OREGON AMATEUR HOCKEY ASSOCIATION

## An Oregon Nonprofit Organization

### Application for NEW Member Association 2023

Safari File Edit View History Bookmarks Window Help Not Secure — egov.sos.state.or.us  
 Business Registry Business Name Search


  
 HOME  
 business information center **business name search** oregon business guide  
 referral list business registry/renewal forms/fees notary public  
 uniform commercial code uniform commercial code search documents & data services

**Business Name Search**

Business Entity Data							10-06-2020 14:05
Registry Nbr	Entity Type	Entity Status	Jurisdiction	Registry Date	Next Renewal Date	Renewal Due?	
152771-14	DNP	ACT	OREGON	05-12-1981	05-12-2021		
<b>Entity Name</b> OREGON STATE HOCKEY ASSOCIATION							
<b>Foreign Name</b>							
<b>Non Profit Type</b> PUBLIC BENEFIT WITH MEMBERS							

**Associated Names**

Type	PRINCIPAL PLACE OF BUSINESS					
Addr 1	1460 SE 58TH AVE					
Addr 2						
CSZ	PORTLAND	OR	97215	Country	UNITED STATES OF AMERICA	

*Please click [here](#) for general information about registered agents and service of process.*

Type	REGISTERED AGENT			Start Date	Resign Date
Name	LESTER J SPARKS			06-16-2016	
Addr 1	1460 SE 58TH AVE				
Addr 2					
CSZ	PORTLAND	OR	97215	Country	UNITED STATES OF AMERICA

Type	MAILING ADDRESS					
Addr 1	OSHA					
Addr 2	PO BOX 7114					
CSZ	SPRINGFIELD	OR	97475	Country	UNITED STATES OF AMERICA	

Type	PRESIDENT			Resign Date