



Olds Minor Hockey Association:  
Certification Reimbursement Policy

**Organization:** Olds Minor Hockey Association (OMHA)

**Policy Name:** Certification Reimbursement Policy

**Date of Policy Adoption:** June 8, 2021

**Date of Policy Amendments:** June 11, 2024/October 7, 2025

**Policy Purpose:** The purpose of the Association's Certification Reimbursement Policy is to comply with Hockey Canada and Hockey Alberta requirements and to determine eligibility for reimbursement for expenses related to certification for Olds Minor Hockey Association affiliates.

**Applicable Hockey Canada Regulation(s):** No  Yes

**Applicable Hockey Alberta Regulation(s):** No  Yes

**Applicable Olds Minor Hockey Association Bylaw(s):** No  Yes

This policy is authorized under Article 3.7.a (i)(vi) of the Olds Minor Hockey Association bylaws.

**Olds Minor Hockey Association Policy:**

*Certification Requirements:*

- All coaches and team officials of the Olds Minor Hockey Association are required to be certified to the level prescribed by Hockey Canada, Hockey Alberta, and the Olds Minor Hockey Association.
- One team official is required to complete the Hockey Canada Safety Program and attend all games as prescribed by Hockey Canada and Hockey Alberta.

*Certification Deadline:*

- All participants are required to register for and complete the appropriate clinic(s) prior to the November 15 Hockey Alberta deadline of the current Membership year.



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### *Reimbursement Eligibility:*

- The Association will reimburse all certifications required to fulfill a team or bench role for the Association.
- The Association will only reimburse clinic registration fees. Expenses such as, but not limited to, travel, accommodation, and meals are not eligible for reimbursement.

### *Reimbursement Submission Requirements:*

- Once certification is completed, participants are required to complete the Association's "Clinic Reimbursement Form" and submit course receipts to the Treasurer for processing.
- Requests for reimbursement will only be accepted until December 15 of the same Membership year. Receipts submitted after December 15 are not eligible for reimbursement.
- Receipts will be reimbursed by the Association within thirty days of submission.

**Policy Review:** This policy will be reviewed annually by the Olds Minor Hockey Association Board of Directors.

### **Policy Oversight:**

The Treasurer is primarily responsible for the implementation of this policy, although there are policy accountabilities for all Association affiliates in this policy.

### **Operational Appendix:**

Clinic Reimbursement Request Form

Hockey Alberta Clinic Registration: [Coaching Requirements | Hockey Alberta](#)



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### CLINIC REIMBURSEMENT REQUEST FORM:

Please complete this form to request reimbursement for clinic registration costs. The online version of this form on the Association website will automatically be sent to the Bookkeeper once you click “submit”, or a printed version of this form may be emailed to: [bookkeeper@oldsminorhockey.com](mailto:bookkeeper@oldsminorhockey.com). Please email receipts to [bookkeeper@oldsminorhockey.com](mailto:bookkeeper@oldsminorhockey.com). Receipts submitted after December 15 in any given year are not eligible for reimbursement.

Name of individual requesting reimbursement:

Please indicate which certifications you are requesting reimbursement for:

- |   |   |
|---|---|
| <input type="checkbox"/> Coach 1                        | <input type="checkbox"/> Coach 2            |
| <input type="checkbox"/> Development 1                  | <input type="checkbox"/> High Performance 1 |
| <input type="checkbox"/> Checking Skills                | <input type="checkbox"/> Respect in Sport   |
| <input type="checkbox"/> Safety Program                 |   |
| <input type="checkbox"/> Other (please provide details) |   |
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Have you emailed your certification receipts to [bookkeeper@oldsminorhockey.com](mailto:bookkeeper@oldsminorhockey.com)?

Yes                    No

Signature:

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Date:

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**FOR OFFICE USE ONLY:**

Reimbursement Meets Policy: Yes No Route to Board for Decision

Reimbursement Amount:

Date Reimbursement Processed :

Refund Issued Via: Cheque or E-Transfer Refund Issued by: