

2023-2024 ALLIANCE PLAYER TRYOUT PERMISSION FORM

USE OF FORM:

- 1. This form is to be utilized on behalf of all players wishing to attend "AAA Zone" tryout/training camps of hockey teams/associations within the ALLIANCE and OMHA.
- 2. Each player is required by Hockey Canada and Ontario Hockey Federation Regulations to present this form to the Appropriate Team Official and/or Head Coach of the team of which the player is trying out.
- 3. Teams/Associations/Clubs are not to allow players to participate without this signed form. Sanctions shall be applied where circumstances warrant.
- 4. This is not a "Player Release" or an "OHF AAA Waiver Form".
- 5. As per OHF Regulation G1 This form is invalid for participant use while the player's current registered team is participating in scheduled league/playdown or sanctioned Branch events.

PLAYER INFORMATION:	
Player's Name	
Players Address	Move in Year:
Player's AAA Zone	
Date of Birth	
Previous Season Team	
The signing officer of the player's home tryout for under this permission: Team/Division:	e centre association/team is to specify which team the player has been authorized to
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Authorizing Signature	March 27, 2023
Authorizing Signature Paul Walsh	Date Chairman Sarnia Hackey Association
Print Name	Chairman, Sarnia Hockey Association Print Title & Full Name of Association
Authorizing Signature AAA Zone	Date
Print Name	Print Title & Full Name of Association

SPECIAL NOTE: If you have moved within the last year, or have changed your Home Centre through a "Right of Choice Document", the appropriate related documentation must accompany this form before participation in try-outs can take place SANCTIONS FOR NOT USING THIS FORM WILL BE APPLIED AS PER THE OHF MEMBER, OHF AND HC REGULATIONS,

OTHER NOTES:

- 1. Minor Hockey Applicability Minor Hockey players must meet player eligibility criteria as established by the HC, OHF and OHF Member Partners to be eligible to obtain the Tryout Form.
- 2. Falsification of this form may result in one-year suspension of the player, as per HC and OHF Regulations.

	*This form is to be used by the ALLIANCE and OMHA only	
Parent Signature	,	