



LETTER OF PERMISSION

THIS FORM IS INTENDED FOR TRACKING PLAYERS ATTENDING AND PARTICIPATING IN SANCTIONED CAMPS, TOURNAMENTS AND EVENTS. THIS FORM DOES NOT GIVE PERMISSION TO TRY OUT.

Player Information:

Name: _____ DOB: _____ / _____ / _____
Month Day Year

Address: _____

Town/City: _____, AB P/C: _____

Current Club Team: _____

Parent/Guardian Name (if applicable): _____

Player or Guardian Signature: _____

Event Information:

MIDGET MAJOR + MINOR AAA ID CAMP

Group Hosting Event: GRANDE PEACE ATHLETIC CLUB

Type of Event: Tournament All-Star Game Development Camp

Dates: Start - APRIL 27, 2018 Finish - APRIL 28, 2018

Location: CROSSLINK COUNTY SPORTSPLEX CLAIRMONT

Sanction Number: _____

Permission:

Resident MHA / Club Team: _____

MHA / Club Team President Name: _____

We, hereby, grant permission for the above named player to attend and participate in the event outlined above. It is understood by all parties that the above named player will return to the Minor Hockey Association / Club Team issuing this Letter of Permission before attempting to register with any other Team in this or a subsequent Season.

MHA / Club Team President Signature: _____