



OPERATIONAL POLICY: MINOR HOCKEY OVERAGE PLAYERS
DATE ISSUED: February 23, 2007
LAST UPDATED: May 31, 2017

POLICY

In order to provide an opportunity for players to access minor hockey within their local minor hockey association, when there are no other relevant options, Hockey Alberta may allow a player that is of first year in a division, by date of birth, to register and participate with a team of a lower age division provided they meet the criteria noted within this Policy.

PROCESS FOR APPROVAL

Approval of all Overage Players must be obtained through an application made by the Minor Hockey Association (MHA) to the appropriate Hockey Alberta Zone Representative (Zone Minor Regulation Coordinator or Zone Minor Female Coordinator).

- The Applying MHA must ensure that all necessary documentation (Overage Request Form and supporting documents) is completed in **its entirety** and submitted as a package;
- The Applying MHA's President must provide a signature of support on the Overage Request Form;
- The Applying MHA must submit the documentation to the appropriate Zone Representative via email;
- The Zone Representative will consult with the respective League to inform them of the request and gather any necessary feedback;
- Upon a decision being made, or additional information being requested, the Zone Representative will communicate directly back to the Applying MHA;
- If approved, the Zone Representative will automatically forward the application and decision to the respective Zone Administration Coordinator, who will add the player's name to the respective roster and notifies the Applying MHA of completion of the process.

Properly submitted applications will be reviewed by Zone Representative if submitted on or prior to December 1 of the current season. No applications will be considered if submitted after December 1. Properly submitted applications will be reviewed and have decisions rendered in accordance with the following timeline.

Submitted by:

- September 15
- October 1
- October 15
- November 1
- November 15
- December 1

Decision by:

- September 30
- October 15
- October 31
- November 15
- November 30
- December 15



CRITERIA

Overage Player applications will not be considered if the supporting rationale is based on the dislike of a coach, teammates, ice time, or anything conduct related. Overage applications will only be considered under the following conditions:

- Applications will only be considered if the team the MHA wishes to register the Overage Player on is the lowest tiered team within the association (applications are not valid for AAA and / or AA teams).
- Applications will only be considered if the player is one (1) year older than the maximum age of the Division of hockey in which the MHA wishes to register the player in.
- Applications will not be considered for players applying to overage from Novice to Initiation.
- In addition to the criteria noted above, applications will only be considered if the player meets one or more of the following and includes the appropriate documentation:
 - Player has a physical or mental impairment / disability, confirmed by a physician, that would restrict him/her from participating within their designated age division;
 - The player's skill level provides limitations, confirmed by a skill assessment, and restricts him/her from participating within their designated age division;
 - The player is from a remote community and there is no team at the appropriate age division within 100 km of travel;
 - The player is a goaltender and there are no other goaltenders for the age division in which the MHA is applying (please note that Overage Goaltenders will not be approved to register with teams within the Atom Division or younger);
- Applications for a Junior aged player will only be considered through consultation with Minor Regulations Chair or Minor Female Chair under the following criteria:
 - The player is still registered full time in high school, does not have access to a Junior program and has a skill set that would restrict him/her from participating in Junior;
- A maximum of three (3) Overage Players will be approved per team;
- Overage Player approvals are valid for current season only.

PROCEDURES

- Prior to a formal decision, Hockey Alberta may use an evaluation or "trial" period to determine the correct division of hockey for any potential applicants.
- Approved Overage Players will be eligible to participate with their registered team in all Exhibition, Tournament, Regular Season League, League Playoff and Provincial games.
- Approved Overage Players are subject to periodic review, as this status is not intended for players whose skill level would enable them to play within their chronological age division.
- Approved Overage Players will be eligible to affiliate to a team of age appropriate division within their MHA, provided said Affiliation is used to evaluate the changing skill level of the Overage Player and is restricted to a maximum of five (5) games within a season.
- Approved Overage Players must be marked as "OA" on all game sheets.
- If it is deemed that the player no longer meets the respective criteria in which the application was approved, the status of the Overage Player may be revoked at any time within the season up to and including December 31.



OVERAGE PLAYER APPLICATION REQUEST FORM

PART A: MHA INFORMATION

Application Date: _____

MHA: _____

Email: _____

President Name: _____

President Signature: _____

PART B: PLAYER INFORMATION

Player Name: _____

Date of Birth: _____ / _____ / _____
Day Month Year

Gender: Male Female

Address: _____

Phone: _____

City/Town: _____

Email: _____

Postal Code: _____ Enrolled in School: Yes No Grade: _____

Has this Applicant been approved for Overage Status (OA) in any previous season? Yes No

Total Years Played: _____ Position: _____

Last Season's Stats: Games Played: _____ Goals: _____ Assists: _____

Penalty Minutes: _____ Suspensions: Yes No

Parent/Guardian Name: _____ Signature: _____

PART C: CURRENT SEASON APPLICATION

Age Division Desired (circle): Novice Atom Peewee Bantam Midget

Team Name: _____ Category / Tier: _____ League: _____

- One (1) year older by birthdate for the division in which we are applying for.
- Player has a physical or mental impairment / disability (attachments).
- Player's skill level provides limitations (attachments).
- Player is from a remote community with no other options for play.
- Player is of Junior age and enrolled full-time in High School (attachments).
- Player is a goaltender that is required for a lower Division team.

HOCKEY ALBERTA APPROVAL

League Signature: _____ Date: _____

Approval: YES NO MRC Signature: _____ Date: _____

Entered in HCR: YES NO MAC Signature: _____ Date: _____