

2018-19 AFFILIATION LIST



MINOR HOCKEY ASSOCIATION _____
 AFFILIATION LIST FOR: _____ (TEAM NAME)
 MINOR OR FEMALE HOCKEY: MINOR FEMALE
 DIVISION: _____ (i.e. Junior, Midget)
 CATEGORY: _____ (i.e. AAA, A, B, C)

SASKATCHEWAN HOCKEY ASSOCIATION
 #2-575 Park St Regina, SK S4N 5B2
 Ph:789-5101 Fax: 789-6112

	LAST NAME	GIVEN NAME	BIRTHDAY (MM/DD/YYYY)			TEAM REGISTERED WITH	DIVISION/ CATEGORY	APPROVED BY (Coach, Mgr of registered team)
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								
16.								
17.								
18.								
19.								

Mgr/Coach Name: _____ Contact (Res): _____ (Bus): _____ (Email): _____ Signature: _____	*THIS PORTION IS TO BE FILLED OUT BY SHA* SHA Approval: _____ Date: _____
---	--

NOTE: IF ADDING TO EXISTING FORM, INCLUDE ALL AFFILIATES FOR THE TEAM
****MUST BE FILED PRIOR TO USING AN AFFILIATE PLAYER...CHANGES TO THE FILED LIST MAY BE MADE UNTIL JAN 10/18****