



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: _____

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

Address: _____

Legal Land Description: _____

Town/City: _____, AB

Postal Code: _____

Respect in Sport Certificate #: _____

Expiry Date: _____

Current Club Team: _____

Parent/Guardian Name (if applicable): _____

Player or Guardian Signature: _____

Event Information:

Group Hosting Event: _____

Type of Event: Tournament All-Star Game Development Camp

Dates: Start - _____ Finish - _____

Location: _____

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: _____