



REQUEST FOR OVERAGE PLAYER EXEMPTION

All requests for Overage Players must be submitted to the OMAHA Registrar & approved by OMAHA prior to the player participating in any league, exhibition or tournament games. Requests will be considered in accordance with BC Hockey Policy 1.12 & OMAHA Policy 1.05. All requests must be signed by the requesting Association President prior to consideration by OMAHA.

Submitting Association: _____	Date: _____
Player's Name: _____	Birthdate: _____ (Month/Day/Year)
Player's Designated Division: _____	
Division Requested: _____	
Playing History: Season: _____ Team: _____ Category: _____ Season: _____ Team: _____ Category: _____ Season: _____ Team: _____ Category: _____	
Reason(s) for Request: _____ _____ _____	
*NOTE: An evaluation on Association letterhead may be requested.	

DECLARATION:

We, the undersigned, understand that the player may not compete in the requested lower age division until approval has been granted by OMAHA. We also understand that OMAHA reserves the right to rescind the approval based on a review of the player's performance in the lower age division.

Parent Name (Print)

Signature

Association President (Print)

Signature

FOR OFFICE USE ONLY	
Date Received: _____	Approved ____ Denied ____
District Signature: _____	
Comments: _____	