

MEDICINE HAT LACROSSE CLUB PLAYER AFFILIATION POLICY

VERSION 2.0

LAST MODIFIED: MAY 15, 2024

1) PURPOSE

To provide an opportunity for higher division or category teams to safely roster a team when a team's regular registered players are sick, injured, or otherwise unavailable.

2) AFFILIATE PLAYER SELECTION PROCEDURE

- a) The head coach of the higher division team or category will contact the affiliate team head coach asking for permission to speak with the potential affiliate player and their parents/guardians.
- b) Upon agreement of affiliation by the higher division team or category head coach and the affiliate player and their family, the request to affiliate form must be completed and emailed to MHLC Coaching Director (mhlc.coachingdirector@gmail.com) and MHLC Vice President (mhlc.vicepresident@gmail.com).
- c) The MHLC Coaching Director and/or MHLC Vice President will communicate to all parties involved the player is now an affiliate for the higher division team or category.

3) POLICY

- a) This policy is supplemental to SALA and ALA regulations, and binds MHLC teams to its terms.
- b) Teams may only select affiliated players from a lower division or category team(s) operating within MHLC, and all such players and team(s) must be properly registered in the ALA with MHLC. Teams competing in the same division are not permitted to affiliate between themselves.
- c) A player must have the approval of the player's registered team to participate in a game as an affiliated player. If the player's registered team has a game that conflicts with a game of the player's affiliated team, priority is given to the player's registered team.
- d) A player's registered team practice always takes priority over the players affiliated teams practice unless concessions are made.
- e) A player may affiliate to multiple and different teams during the same season, considering the remainder of this policy is followed.
- f) Providing affiliation has been declared, filed, and approved with MHLC, affiliates are eligible to participate in all exhibition, tournament, league, playoff and provincial championship games.
- g) During regular season play, teams are only permitted to use an affiliated goalie if the team's registered goalie is sick, injured, or otherwise unavailable. Teams may have an affiliated goalie on the bench during all games, but the affiliated goalie is

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not permitted to play unless the team's registered goalie is sick, injured, or otherwise unavailable.

- h) Affiliated players used by a higher division/category team in a game, shall be designated on the official game report using the symbol "AP" after their name.
- i) Suspended players are not eligible to affiliate until their suspension is served with their regular team.
- j) U9 and U11 teams are able to affiliate a non-goalie participant when their roster size is less than fifteen (15) non-goalie participants, even if their regular roster size is above that number.
- k) U13, U15 and U17 teams are able to affiliate to bring their roster up to maximum allowable players under ALA regulations.
- l) Affiliates cannot be used to replace a suspended player.
- m) U7 participants are bound by this policy.

4) NUMBER OF GAMES A PLAYER MAY PLAY IN A HIGHER DIVISION OR CATEGORY

- a) A player of a team of a lower division or category may affiliate to a team of a higher division or category at any time, to a maximum of four (4) regular season and SALA playoff games.
- b) Exhibition games and tournament play outside SALA regular season and playoffs do not count towards the maximum of four (4) games.
- c) Appearance of an affiliated player's name on the official game report of a game shall be considered participation in the game except in the case of an alternate goaltender, in which case only actual participation shall be considered as taking part in the game, and such participation shall be specially noted on the official game report.
- d) It is the responsibility of the team manager of the receiving team of an affiliate to communicate this affiliation to the MHLC Coaching Director (mhlc.coachingdirector@gmail.com) AND MHLC Vice President (mhlc.vicepresident@gmail.com) within 24 hours of participation in a SALA regular season or playoff game.

5) PLAYER AFFILIATION REQUEST PROCEDURE

- a) If an affiliated team deems it necessary to use an affiliated player, that coach shall send the request to the player's registered team coach.
- b) If approved by the coach, the player, and the player's parents, the player will then be asked if they would like to participate in the affiliated team's request.
- c) The MHLC Player Affiliation Form is then completed by the requesting team's head coach and sent to MHLC Coaching Director (mhlc.coachingdirector@gmail.com) AND MHLC Vice President (mhlc.vicepresident@gmail.com).
- d) The affiliation is reviewed and communicated.

MEDICINE HAT LACROSSE CLUB PLAYER AFFILIATION FORM

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Purpose: To provide an opportunity for higher division or category teams to safely roster a team when a team's regular registered players are sick, injured, or otherwise unavailable.

The following areas **MUST** be addressed by all participants:

- The skill of the player being affiliated AND the skill of the players in the higher tier/division.
- The experience of the player being affiliated AND the experience of the players at the higher tier/division.
- The physical size of the player being affiliated AND the physical size of the players at the higher tier/division.
- The athleticism of the player being affiliated AND the athleticism of the players at the higher tier/division.
- The physical aggressiveness of the player being affiliated AND the physical aggressiveness of the players at the higher tier/division.

Policy: In assisting all concerned (the player, parents, and coaches of both teams) understand the risks and responsibilities associated with such upward affiliation, the Medicine Hat Lacrosse Club requires that the bottom portion of this form be completed in full and forwarded to the MHLC Coaching Director (mhlc.coachingdirector@gmail.com) AND MHLC Vice President (mhlc.vicepresident@gmail.com) prior to ANY affiliation of ANY MHLC player for the purpose of game play at a higher tier/division of play.

Affiliate Player's Name:	Date of Birth:
Current Age Division & Team Name:	Affiliate Age Division & Team Name:
Current Coach:	Affiliate Team Coach:
Current Coach's Signature:	Affiliate Coach's Signature:
Current Coach's Contact #:	Affiliate Coach's Contact #:
Parent/Guardian Name:	Date:
Parent/Guardian Contact #:	

MHLC ONLY:

Date Received:	Completed in Full: ()	Approved: ()	All Parties Advised: ()
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