

Parent's Name (Please Print)

Parent's Signature

We would like to make the following player request:

FRIENDSHIP PLAYER REQUEST 2024-2025 SEASON

FRIENDSHIP PLAYER REQUESTS are not accepted for Tiers 1 & 2 Contact and Tier 1 No-Contact. Only ONE Friendship Request per player will be considered.

we are making this request for the following reasons.	
BY SIGNING THIS FORM, I ACKNOWLEDGE THAT:	
The coaches are the individuals who draft their tea	ıms.
 Sibling and/or Friend Requests will only be fulfilled (within 1 tier). 	d if the players are at approximately the same skill levels
> A player may play at a tier lower than if this friend	request had not been made.
 Players drafted at Tiers 1 & 2 (Contact) or Tier 1 (No-Contact) are expected to play where they are drafted. There is no guarantee that this request will be fulfilled. 	
REQUESTING PLAYER	SECOND PLAYER
REQUESTING PLAYER	SECOND PLAYER
REQUESTING PLAYER Player's Name (Please Print)	SECOND PLAYER Player's Name (Please Print)
Player's Name (Please Print) Player's Signature	Player's Name (Please Print) Player's Signature
Player's Name (Please Print)	Player's Name (Please Print)
Player's Name (Please Print) Player's Signature	Player's Name (Please Print) Player's Signature

Please scan and email this form to the NWZ Registrar @ registrar@nwzhockey.ca .

Received by the NWZ Registrar on ______, 2024.

Any player may be listed on <u>ONE</u> Player Friendship Request Form only. All requests MUST be signed by both players and both sets of parents. Requests MUST be received by the NWZ Registrar by September 15, 2024.

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