

Ponoka Minor Hockey Association Individual Player Affiliation Agreement



Any team wishing to register an affiliate **MUST** complete this form and submit it to the Ponoka Minor Hockey Association Registrar **by December 01/2022**. See contact information at ponokaminorhockey.ca for current registrar name, email and phone number. Please print all information clearly.

Player's Name: _____

Current Team: _____

Division: _____

Category/Tier: _____

Association: Ponoka Minor Hockey

Affiliated to (team name): _____

Division: _____

Category/Tier: _____

Form Completed by: _____

Position: _____

Team Name: _____

Parent Name: _____

Parent Signature: _____

Player Signature: _____

Current Coach Signature: _____

A PLAYER MAY ONLY BE AFFILIATED TO ONE (1) TEAM. NO AFFILIATE CAN PLAY UNTIL THE PMH REGISTRAR ADVISES THE TEAMS THAT THE REGISTRATION AND AFFILIATION PROCESSES ARE COMPLETE. TEAMS MUST USE THE PROPER PROCESS FOR REQUESTING AND USING AFFILIATES, PER PMH AND HOCKEY ALBERTA POLICY.

PONOKA MINOR HOCKEY REGISTRAR USE ONLY:

Date Received by (Registrar):	
CAHL/RMFHL Approval Recieved:	
HCR Roster Addition Complete (date):	
Teams notified of affiliation approval (date):	
Registrar signature:	