



## Exceptional Player Form Male

### **Under 11 to Under 13 AA(Male)**

Second year Under 11 players/goaltenders, may be advanced to Under 13 AA tryouts through the following procedure.

- 1) A request for concession must be submitted in writing to Prince Albert Hockey by September 1<sup>st</sup> of the current Hockey season.
- 2) The request for concession must be accompanied by a non-refundable \$50.00 fee.
- 3) The player in question must have played Under 11 'A Division' the previous season.
- 4) The request for concession must include supporting letters from objective sources, Coaches, Coordinators, etc.

If these guidelines are met, then the request for concession will be dealt with by the Board on a case-by-case basis.

It should be understood that any Under 11 aged player to be able to make the AA team must evaluate in the top half of the number of rostered players in his respective position.

ie: Top 3 Defencemen, Top 5 Forwards.

### **Under 13 to Under 15 AA(Male)**

Second year Under 13 players/goaltenders, may be advanced to Under 15 AA tryouts through the following procedure.

- 1) A request for concession must be submitted in writing to Prince Albert Hockey by September 1<sup>st</sup> of the current Hockey season.
- 2) The request for concession must be accompanied by a non-refundable \$50.00 concession fee.
- 3) The player in question must have played Under 13 'AA Division' the previous season.
- 4) The request for concession must include supporting letters from objective sources, Coaches, Coordinators, etc.

If these guidelines are met, then the request for concession will be dealt with by the Board on a case by case basis.

It should be understood that the Under 13 aged player to be able to make the Under 15 AA team must evaluate in the top half of the number of rostered players in his respective division.

ie: Top 3 Defencemen, Top 5 forwards.

**\*\* NOTE \*\*** All SHA Rules and Regulations must be followed.

Please drop off at the office or email to [pahockey1@gmail.com](mailto:pahockey1@gmail.com)



## Prince Albert Hockey Exceptional Player Form Male

Player's Name in full(please print)

Player's Date of Birth

Month:

Date:

Year:

Player's Parent(s) / Guardian(s) name in full (please print)

Signature of Player's Parents(s) / Guardian(s)

Parent(s) / Guardian(s) Email

Teams Played with last three seasons

1:

2:

3:

Please Attach Supporting Letters