



AAA PERMISSION TO SKATE (PTS): U14 – U16 2021-22 SEASON

25 Brodie Drive, Unit 3, Richmond Hill, Ontario L4B 3K7

For use by Associations whose members (U14 – U16) are part of one of the following AAA Associations or AAA Zones:

BRANT ZONE, CAMBRIDGE ZONE, HURON-PERTH ZONE, KITCHENER ZONE, WATERLOO ZONE (WITH THE EXCEPTION OF CENTRE WELLINGTON OR WOOLWICH), CHATHAM-KENT ZONE, ELGIN-MIDDLESEX ZONE, LAMBTON ZONE, LONDON ZONE, SUN COUNTY ZONE OR WINDSOR ZONE.

USE OF FORM:

1. This form is to be utilized on behalf of all OMHA players wishing to attend "AAA Zone" tryout/training camps of hockey teams/associations within the OMHA and ALLIANCE.
2. Each player is required by Hockey Canada and Ontario Hockey Federation Regulations to present this form to the appropriate Team Official and/or Head Coach of the team of which the player is trying out.
3. Teams/Associations/Clubs are not to allow players to participate without this signed form. Sanctions shall be applied where circumstances warrant.
4. **This is neither a "Player Release" nor an "OHF AAA Waiver Form".**
5. This form is invalid for participant use while the player's current registered team is participating in scheduled league/Playdown or sanctioned Branch events.

PLAYER INFORMATION:

Name: _____ Date of Birth: _____

Address: _____


Home Association: _____ Home AAA Zone: _____

Previous Season Team: _____

The signing officer of the Player's Home Association verifies that the above noted Player has been authorized to try out for:

Home AAA Zone Team in the Player's Age Division Division: _____

The authorized signing officer of the player's previous season association/team/club must endorse completed copies of this form subject to the player having no outstanding obligations to the association/team/club. The issuer(s) of these forms should keep a record of the forms that they issue.

 _____ Authorizing Signature	 _____ Date
---	-------------------

 _____ Print Name	 _____ Print Title & Full Name of Association
-------------------------	---

 _____ Authorizing Signature AAA Zone	 _____ Date
---	-------------------

 _____ Print Name	 _____ Print Title & Full Name of Association
-------------------------	---

- If you have moved within the last year, or have changed your Home Association through a "Right of Choice Document", the appropriate related documentation must accompany this form before participation in try outs can take place.
- Sanctions for not using this form will be applied as per the OHF Member, OHF and HC Regulations.

Other Notes:

1. Minor Hockey Applicability - Minor Hockey players must meet player eligibility criteria as established by the HC, OHF and OHF Member Partners to be eligible to obtain the Tryout Form.
2. Falsification of this form may result in one-year suspension of the player, as per HC and OHF Regulations.

Parent Signature

This form is to be used by the OMHA only.