

## **Player Affiliation Request Form**

## The purpose of this form is to ensure coaches, players, and parents understand the affiliation process

- 1) Prior to a team placing a player's name on its team list as an affiliate, that team must receive permission from the team to which the player is a registered member.
- 2) All Affiliation requests must be processed through the HCR as an Affiliation Request. This signed document must be uploaded on the HCR Affiliation Request in order to be approved.
- 3) Permission to use an affiliated player must be obtained on a game-by-game basis from the player's original team as per Hockey Canada Regulation F.
- 4) Not Withstanding bullet #3, no Player can be denied the opportunity to play as an affiliate with a Higher Category team where no Game conflict exists.
- 5) Not withstanding the "No Game Conflict" (bullet #4) clause, a player who is currently recovering from Injury and has not been cleared to play by a Physician, or the player is currently serving a suspension, are not eligible to play with a Higher Division or Category team as an affiliate player.
- 6) For Junior hockey and Regional and National Championship eligible teams, a Player of a Team of a lower Division or Category may Affiliate to a Team or Teams of higher Divisions or Categories at anytime, to a maximum of Ten (10) games per team.
- 7) A Minor Hockey player not playing on a team that competes for a Regional or National Championship may play 15 games with the higher category/division team in the entire season as per Hockey Canada and HEO Regulations.
- 8) It is the responsibility of the player, coach and parent to keep track of the number of meaningful games played. **Tournament and exhibition games are not included in the affiliation rule.**
- 9) A Goaltender game count is only considered for games that they play, acting as a backup for an entire game does not count against the total number of games permitted.
- 10) No players may be affiliated after January 15<sup>th</sup>.
- 11) A player is only **permitted to participate as an affiliated player with ONE (1) hockey team** of a particular category during a playing season.
- 12) Prior to a player participating in a game as an affiliated player, the player's name must appear on the affiliating team's team list. Also, this form must be duly approved (by signature first by the Association and second by the District Registrar.
- 13) Parents of players affiliated to teams competing in **body checking** divisions/leagues shall be so notified by the coach of the team requesting the player affiliation. The signatures below will confirm notification and/or discussion with regard to body checking.
- 14) All suspensions obtained in the higher category/division game must be served with the lower team.



## Season 20\_\_\_\_/20\_\_\_\_

PLAYER INFORMATION					
PLAYER HOCKEY REGISTRY NUMBER:			Date of Birth: (YYYY-MM-DD)		
NAME OF AFFILIATED PLAYER (PRINT)		SIGNATURE			
PARENT INFORMATION					
PARENT NAME (PRINT)				Date:	
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Parent Signature			Parent Signature		
AFFILIATING TEAM INFORMATION					
CATEGORY OF TEAM (Print)					
NAME OF TEAM (Print)					
LEAGUE OF TEAM (Print)					
COACH NAME (Print)					
COACH SIGNATURE				Date:	
PLAYER TEAM INFORMATION					
CATEGORY OF TEAM (Print)					
NAME OF TEAM (Print)					
LEAGUE OF TEAM (Print)					
COACH NAME (Print)					
COACH SIGNATURE				Date:	
REGISTRAR INFORMATION					
REGISTERED MINOR HOCKEY HOME ASSOCIATION/LEAGUE (Signature)			REGISTERED JUNIOR TEAM (signature) (Complete this section only if applicable)		
Name of Association/League (Print)			Name of Junior Team (Print)		
NAME (Print)			NAME (Print)		
SIGNATURE			SIGNATURE		
Date			Date		
District Registrar NAME (Print)					
SIGNATURE			- -		
Date					
Association Registrar NAME (Print)					
SIGNATURE					
Date			All required signature passed to the registrate	es must be completed prior to being rs	