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OFFER OF AFFILIATION

2023-24 SEASON

Waterloo Minor Hockey Association

We, the undersigned, provide this “offer of affiliation” for the designated player to register as an affiliated player with the designated team for the 2023-24 season. By the player signing this form, as well as their parent/guardian, they are confirming their commitment to accepting the position as an affiliated player (“AP”) on the team indicated below. By the Coach of the player’s registered team signing this form, they acknowledge this player has committed to participating as an Affiliated Player for the below mentioned team.

Coach of Team Offering Affiliation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Offered: \_\_\_\_\_ day of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.

We, the undersigned, confirm our acceptance of the Offer of Affiliation with the above noted team.

Player’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Player’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coach of Player’s Registered Team: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Accepted at\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Ontario this\_\_\_\_\_\_\_\_day of\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_.

Note: Current ALLIANCE, OHF & HC Affiliation Regulations apply.

**PRIVACY STATEMENT**: The information requested on this form is required by the Waterloo Minor Hockey Association (WMHA) for registration purposes and to administer the rules and regulations for the ALLIANCE. To do so, the WMHA may request proof of player’s identity, address, and date of birth.

**WMHA AFFLIATED PLAYERS’ (AP) POLICY**: As per the Affiliated Players’ policy in the WMHA Representative Teams Information Manual, the Affiliated Players’ ***priority must be to the team to which they are rostered***. After the player is approved as an AP on a team’s roster, the Coach of the team needing the AP is responsible for speaking to the Coach of the player’s rostered team about the potential of playing. ***No Coach requesting the use of an AP is permitted to call a player directly unless requested to do so by the Coach of the team to which the player is rostered.*** A player is only permitted to Affiliate to one (1) team per season. Please review the complete policy in the WMHA Manual to confirm additional details.