



AFFILIATED PLAYER AGREEMENT

Fill out the following form; obtain the necessary signatures and forward to your respective Competitive Representative. Be sure to keep a copy for your own records and provide copies to the affiliated players coach and parents. The affiliated player information must be sent to the North London Sports Association Registrar to ensure the player is added to your Alliance Official Roster.

Player Information

Name: _____

Association: **North London Sports Association**

Home team Classification: House League Minor Development

Division (i.e.U13): _____

Affiliated Team Information

Association: **North London Sports Association**

Team Classification: House League Minor Development

Coach: _____

Team Classification: **House League**

Division (i.e. Atom WB or Major Bantam): _____

NOTE: Players' priority will be league, league playoffs and tournaments. Exhibition games and practices are not a priority. Players' choice (other than league, league playoffs & tournaments) will not be influenced one way or the other by his/her coach. If the coach wishes and at his/her discretion, he/she may let the player play with his/her A.P. team when priorities conflict. When a coach wishes to use one of his/her A.P. players it is MANDATORY that calls be made first to the Association and the coach before contacting the A.P. player.

1st call to Association CHL Director _____
(Name) (email)

2nd call to coach _____
(Name of Carded Players Coach) (email)

Please read the following paragraph and sign below:

I understand that I can only affiliate to one hockey team and that I will only be called up to replace a player on that team's roster (not to increase the roster).

Player: _____
(Signature of player) (Date)

Parent or Guardian: _____
(Signature of parent or guardian) (Date) (Print name)

Team Official: _____
(Signature of Official) (Date) (Print name and role)