

STANDARD OPERATING PROCEDURE:

SOP 002: RECREATIONAL TOURNAMENT AFFILIATES

STEP ONE: Complete the BC Hockey Application for Recreational Relief

To affiliate for tournaments they must actually be rostered by BC Hockey for the individual .

1. Page one to be completed by the team and must have the Association Presidents signature
2. Page 2: Must be completed by each parent of a player being affiliated with thier signature.

STEP TWO: Compile All Applicable Documents

1. Your Hockey Canada Roster for your Team showing Players that will be unable to participate
2. Tournament Permission Letter
3. Completed BC Hockey Application for Recreational Relief Form

STEP THREE: Send completed documents to League Manager

STEP FOUR: League Manager send to PCAHA office for Approval



BC Hockey Application for Recreational Player Replacement/Relief

According to BC Hockey Policy 7.12, a Minor Hockey Association may apply for player relief/replacement for a recreational team that has insufficient players (twelve or fewer skater or fewer than two goaltenders) to a maximum of fifteen players (including goaltenders) to attend a recreational tournament for a maximum of three tournaments per season. Team's HCR affiliates must be contacted for availability prior to requesting relief. Refer to the BC Hockey Policy Manual for details.

Instructions:

Submit the following to the District Minor Hockey Operations Task Group Member at least seven days prior to the tournament:

1. Completed application form. Application must be signed by the MHA President or accompanied by an email or letter from the MHA President endorsing the application.
2. **Current HCR roster of team, indicating players unavailable for tournament.**
3. Attached form(s) signed by player's parent/guardian agreeing to player's participation in tournament

Requesting MHA, Team & Division

Reason for Request

Have team's affiliate players been contacted for availability? Yes No

If 'No', why not?

Proposed Relief Player Information:			
Player Name	HCR #	Team	Position (Skater/Goaltender)

Host MHA:

Division:

Sanction #:

Dates:

Endorsed by MHA President:

Signature: _____ or attached email/letter

Name: _____

Date: _____

After review, the District Minor Hockey Operations Task Group Member will advise the MHA whether or not the request is approved. If approved, the replacement player(s) will be added to the requesting team's roster for the tournament, then removed. A new HCR roster will not be created.

BC Hockey Request is:

Approved

Denied

If denied, reason:

Minor Hockey Operations Task Group Member: _____

Date

Signature





Parent Consent:

I consent to allow my son/daughter (Players Name) _____ to participate with the
(Requesting MHA) _____ team of the _____ Minor Hockey
Association

For the following tournament:

Tournament Host: _____ Division: _____
Dates: _____ Name: _____
Relationship to Player: _____

