



TRAVEL -PERMISSION TO PLAY APPLICATION

ASSOCIATION: **PRMHA**

PRESIDENT: **Patrick Devereaux**

TEAM NAME: _____ COACH: _____

DIVISION: _____ DATE OF EVENT: _____

PLEASE CHECK THE APPROPRIATE TYPE OF EVENT AND COMPLETE THE INFORMATION

- TOURNAMENT
- EXHIBITION GAME

TOURNAMENT SANCTION

PERMIT NUMBER (if applicable): _____

ASSOCIATION NAME: _____

EVENT CONTACT NAME: _____

TELEPHONE NUMBER: _____

FAX NUMBER or EMAIL: _____

NUMBER OF GAMES: _____

IMPORTANT: The following conditions shall be met or disciplinary action may result.

1. Local league and play-off commitments have been met.
2. The event is sanctioned.
3. All opposing teams are appropriately registered members of a HC/BCAHA-recognized organization.
4. All original game sheets will be mailed to the undersigned immediately upon the team's return.

PLEASE NOTE: A team roster of the players who will be travelling must be attached to this application.

PRMHA President

TRAVEL # 06/07_____