Vancouver Island Amateur Hockey Association

2301-E McCullough Road Nanaimo BC V9S 4M9 info@viaha.org www.viaha.org Ph: 250-751-8811 Fax: 250-751-8812

2018 REQUEST FORM TO ATTEND T1 TRYOUTS (FOR PLAYERS WHO DO NOT RESIDE WITHIN A 'HOST MHA' DRAW ZONE ONLY)

NOTE: "Out of Draw Zone players wishing to attend a 'T1 Host MHA' Tryout MUST submit both pages of this request form to their applicable T1 Host MHA with the \$125.00 fee by the DEADLINE OF: July 24th, 2018 (Mail & Drop off Info for each 'Host T1 MHA' is listed on Page 2)

PART 1 of 2 - PLAYER INFORMATION SECTION This section must be completed by the Player, Parent/Guardian				
Players Name:		Date of Birth: DD:	MM: YYYY:	
Home Address:				
Postal Code:	Parent Email	/s:		
Parent Phone #/s:				
I am currently registered with			Minor Hockey Association.	
 Interested North-Island Players from Tri-Port MHA, Gold River MHA, Campbell River MHA & Powell River MHA will attend Comox Valley MHA T1 Tryouts Interested Mid-Island Players from Oceanside MHA, Alberni Valley MHA, Lake Cowichan MHA & Cowichan Valley MHA will attend Nanaimo MHA T1 tryouts Interested South-Island Players from Sooke MHA, Kerry Park MHA and Victoria MHA will attend CRD East T1 Tryouts with JDF Interested South-Island Players from Peninsula MHA, Saanich MHA will attend CRD West tryouts with VRC *Note* If a player is not successful in making a T1 MHA Host Team they will need to return to their original MHA. I am requesting to attend the following T1 Host MHA Team Tryout Camp: (Tick one only): 				
NORTH ISLAND (Host - Comox MHA) Midget Bantam Pee Wee	MID-ISLAND (Host - Nanaimo MHA) Midget Bantam Pee Wee	CRD East (Host - JDF MHA) Midget Bantam Pee Wee	CRD West (Host - VRC MHA) Midget Bantam Pee Wee	
	on:			
	s that staff need to be aware of: N	_		

WHEN: *Evaluation Camps will run during the weeks of August 17th - 27th, 2018 with a showcase week to follow (details to be released separately).

> T1 Host MHA's are unable to neither accept nor transfer players with incomplete requests -Be sure to include 2nd page & fee too.....



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PART 2 of 2 - PARENT INFORMATION SECTION

This section must be completed by the Parent/Guardian			
Mothers Name:	Fathers Name:		
Or Guardians Name:			
Contact Info: (if other than above):			
evaluations outside of his/her regular	By my signature, I give permission for my Son/Daughter to participate in T1 MHA. I also understand that should my child not be successful in making the T1 e rejected and they will be returned to their original MHA.		
(Parent/Guardians Signature)	(Date)		
North Isla	*NSF Charges as per the T1 Host MHA DROP-OFF COMPLETED REQUEST & FEE TO THE PLAYERS APPLICABLE 'T1 HOST MHA' AT: and Players send to Comox MHA PO Box 3226, Courtenay, BC V9N 5N4 drop off at Happy's Source for Sports 256-6 th Street Courtenay)		
Mid Islan	nd Players send to Nanaimo MHA PO: Box 562, Nanaimo, BC V9R 5L9 imo Ice Centre, 750 Third Street – left back side of building - check website for hours)		
·	yers send to Juan de Fuca MHA 1767 Island Highway, Victoria, BC V9B 1J1 in the JDF Arena lobby/Westshore Parks & Rec Office – check website for more info)		
	Victoria Racquet Club MHA PO Box 31107 #314 – 3980 Shelbourne Street Victoria BC V8N 6J3 mail Registrar for the best drop-off location at <u>vrcregistrar@gmail.com</u>)		
Once all is received the T1 Host N	MHA can then proceed with initiating a transfer which is necessary for insurance reasons		
	FOR T1 HOST MHA OFFICE USE ONLY:		
DATE RECEIVED	PAYMENT STATUS:		