



PACIFIC COAST AMATEUR HOCKEY ASSOCIATION

CENTRAL OFFICE: #114 - 3993 HENNING DRIVE, BURNABY, B.C. V5C 6P7
TELEPHONE 604-205-9011. FAX 604-205-9016. WEB SITE <http://www.pcaha.ca>

SERVING AMATEUR HOCKEY IN THE LOWER MAINLAND SINCE 1941

Preliminary Try-out Approval Form

Form143
(Issued: Aug/07)
(Rev: June 2016)

In situations in which a player meets the requirements to move to another Association under the No "A" Team in the Division or No HC-Carded Female Team rules as a result of his/her residential Association offering no HC-carded team in the player's age division, the player may apply for Preliminary Try-out Approval in order to try out for a HC-carded team at the indicated Association. Preliminary Try-out Approval does not become effective until this form has been completed and filed with the Pacific Coast Amateur Hockey Association Office.

Procedure:

1. The player's residential Association shall declare in writing that it will have no HC-carded team in the player's age division for the current season.
2. The respective Association Registrars shall indicate support for Preliminary Try-out Approval to be granted, in writing (see below).
3. Once this form has been completed and has been filed with the PCAHA Office, the player may attend try-outs in the one (1) new Association named in this form.
4. Should the player be selected for a HC-carded team, he/she shall complete and submit an Application for Player Movement to remain at the new Association for the current season.
5. Should the player not be selected for a HC-carded team, he/she shall immediately return to his/her residential Association to play on a non-HC-carded team.
6. Preliminary Try-out Approval shall terminate as of the date of selection in #4 or #5 or October 1st of the current season, whichever comes first.

Section 1 - Player's Information:

Name:	Division:
Hockey ID#:	Date of Birth:
Address:	
City:	Postal Code:
E-mail:	Telephone:
Player's Current Association:	
Request to Try-out for Association:	

Section 2 - Registrars' Approval:

Current Association:	Registrar's signature:			
	Print name:		Date:	
New Association:	Registrar's signature:			
	Print name:		Date:	

Section 3 - PCAHA Use:

<input type="checkbox"/> Approved <input type="checkbox"/> Denied	Date:
	Reason(s):
	Signature: