## 2014-2015 MAHA CREDENTIALS REVIEW REQUIREMENTS **EACH TEAM IS REQUIRED TO PRESENT THE ITEMS**

LISTED BELOW AT THE CREDENTIALS REVIEW:

| NO | IE: | We will not keep an entire booklet. We will keep only the items marked "BRING A COPY".  |
|----|-----|---|
|    | 1.  | MAHA DISTRICT / STATE PLAYOFFS: TEAM CREDENTIALS Form (Included in this package.)  - Complete the top portion of the front side of the form and the complete back side of the form in advance of review.  |
|    | 2.  | TEAM CREDENTIALS VERIFICATION SHEET (1-C) (CVS)   |
|    |     | - generated by the USA Hockey Registry Program (BRING A COPY)   |
|    |     | - MUST show that Coaches on the bench have attained the <u>CEP level</u> mandated by USA Hockey. It must also show that Coaches and Managers have completed the USA Hockey <u>Safe Sport</u> training, completed a <u>Background Screening</u> & the required <u>Coaching Module</u> . The CVS is generated by your local association or Independent registrar and will have players and coaches names pre entered. The CVS should be completed after January 1 to show the most current information. IF the CVS does not have the boxes 'auto-checked', bring a hard copy of compliance proof for each item.   |
|    |     | Complete the game log with game dates and players who played in each game. Leave the columns to the right blank.  |
|    | 3.  | USA HOCKEY TEAM ROSTER FORM (1-T) - generated by the USAH Registry Program (BRING A COPY)   |
|    |     | - This form must be electronically signed and approved by an Associate Registrar. Only players on this form as of Dec. 31, 2014 who have played the required number of games are eligible for District/State play. The Official 1-T roster is available from your association/independent registrar or by contacting your District Associate Registrar. The Official 1-T roster is recognizable by the USA Form 1-T in the upper right corner of the roster.  - If you have only one goalie, you may borrow a back-up. This goalie can only be used in case of injury to your rostered goalie. A team may pick up a substitute goalie from within its own association or District if it does not already have a spare goalie registered. If a team elects to bring a substitute goalie, the team may have only 19 players registered at any time so as not to exceed the maximum number of players allowed. This goalie must already be signed to an approved U.S.A. Hockey roster and cannot be playing for another team in the same division in the M.A.H.A. Playoffs. All of the same paperwork must also be submitted for the back-up goalie plus a note of permission from the coach or manager of this goalies' regular team. (Use MAHA Form #7 or equivalent.)  - For non-national bound divisions, the substitute goalie must be registered in the current season on a team of equal or lower age classification and equal or lower team classification. For national bound divisions, the substitute goalie must be registered in the current season on a lower classification team. |
|    | 4.  | BIRTH CERTIFICATES  |
|    |     | -If the USAH Registry generated roster shows a birth certificate verified by a USAH Associate registrar there will be a box with a check mark inside in the V column of the roster if the USAH Associate registrar that approved this team has stamped the roster with the notation that all birth certificates have been verified, and affirms such via a signature, birth certificate review is not required - if not noted as above, each player's government issued Birth Certificate copy is to be reviewed. (Not Baptismal record, etc.)  |
|    | 5.  | PLAYER TRANSFER forms for Non-US Citizens approved by the USA Hockey National Office  |
|    |     | - If the USAH registry generated roster does not show verified proof of legal residency and an approved transfer with a circled 'T' or 'S', Non-US citizens must provide proof of legal residency and proof of release from home country ice hockey federation.   |
|    | 6.  | FOR EACH MEMBER of TEAM, in order shown on CREDENTIALS VERIFICATION FORM  |
|    | a.  | - USA HOCKEY CONSENT TO TREAT FORM for each player, coach and manager   |
|    |     | - USA HOCKEY PARTICIPANT CODE OF CONDUCT FORM for each player, coach and manager  |
| Щ  |     | - MAHA PARENTS S.T.A.R. FORM - a signed copy for each player.   |
| Ш  | 7.  | <b>TEAM GAME LOG</b> (BRING A COPY)  - This is a list of all games played by your team this season. List the game date, arena, opponent and score.  |
|    |     | NOTE: Game logs will be monitored for both team and individual player game count. (See MAHA Annual Guide for game count rules.) You also must bring an updated copy of the log to your first MAHA Playoff game.   |
|    | 8.  | SCORE SHEETS FOR ALL GAMES PLAYED.  |
| _  |     | - Please put your scoresheets in chronological order to expedite this review. Sheets will be reviewed for game  |
| _  |     | counts and suspensions served for the entire season.  |
| Ш  | 9.  | HIGH SCHOOL JV STUDENT PICTURE ID FOR EACH PLAYER   |
|    |     | - Required to verify Division 1 or Division 2 team classification   |

|  | M.A.H.A. DISTRI       | CT / STATE PLAYOFFS: TE   | AM CREDENTIALS           |
|--|-----------------------|---|--------------------------|
| COMPLETE TO  | P PORTION OF THIS PAG | DIVISION:   |                          |
|  | S VERIFICATION SHEET  | ASSOCIATION:  |                          |
|  | E PRINT               | ASSOCIATION.  |                          |
|  |                       | TEAM NAME:  |                          |
|  |                       | COLORS: HOME:   | AWAY:                    |
| TEAM CON   | TACT: NAME:           |   |                          |
| COACH:   | ADDRESS:              |   |                          |
| MANAGER:   | l                     |   |                          |
|  |                       |   | PH: C: ( )               |
| E  | E-MAIL ADDRESS:       |   |                          |
| ALT. CONT.   | <b>ACT:</b> NAME:     |   |                          |
| COACH:   | ]                     |   |                          |
| MANAGER:   | CITV:                 |   | 7ID:                     |
|  |                       |   | PH: C: ( )               |
| E  | E MAII ADDDESS:       |   |                          |
| HOTEL:   |                       | PHONE NO:   | ROOM #:                  |
| For M.A.H.A.   | Use Only: CREDE       | NTIALS CHECK:   |                          |
|  |                       |   |                          |
|  | TEAM (1-T) ROSTEI     |   |                          |
|  | TEAM (1-T) ROSTEI     | R   |                          |
| CERTIFIED<br>GAME LOG  | TEAM (1-T) ROSTEI     | R   | r, coach and manager *** |
| CERTIFIED GAME LOG **** Complet                                  | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe            | r, coach and manager *** |
| CERTIFIED GAME LOG **** Complet                                  | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe            |                          |
| CERTIFIED GAME LOG **** Complet CREDENTIALS                      | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe            |                          |
| CERTIFIED GAME LOG **** Complet CREDENTIALS                      | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe            |                          |
| CERTIFIED GAME LOG **** Complet CREDENTIALS                      | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe            |                          |
| CERTIFIED GAME LOG **** Complet CREDENTIALS                      | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe            |                          |
| CERTIFIED GAME LOG **** Complet CREDENTIALS NOTES:               | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe            | DATE VERIFIED:           |
| CERTIFIED GAME LOG **** Complet CREDENTIALS NOTES:               | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe nitial):   | DATE VERIFIED:           |
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| CERTIFIED GAME LOG **** Complet CREDENTIALS NOTES:               | TEAM (1-T) ROSTEI     | Total Games: As of: back of this form for each playe nitial):   | DATE VERIFIED:           |
| CERTIFIED GAME LOG *** Complet CREDENTIALS NOTES:                | TEAM (1-T) ROSTEI     | Total Games: As of:   | DATE VERIFIED:           |
| CERTIFIED GAME LOG **** Complet CREDENTIALS NOTES:  PAYMENT to I | TEAM (1-T) ROSTEI     | Total Games: As of: Laback of this form for each playe nitial): | DATE VERIFIED:           |

## YOU MUST ALSO PROVIDE A COMPLETED CREDENTIALS DATA FORM. SEE YOUR ASSOCIATION REGISTRAR WHO WILL GENERATE THIS FORM FOR YOU.

## YOU MUST FILL IN THE GAME DATES AND PLAYERS WHO PLAYED IN EACH GAME TO SHOW THAT:

- YOUTH & GIRL'S DIVISIONS: Each player has played in (10) Games
- YOUTH DIVISIONS: The team has played (20) games
- GIRL'S / WOMENS DIVISIONS: The team has played (14) games

