

POND HOCKEY PROGRAM SANCTIONING FORM



This form shall be completed, in its entirety, by any Pond Hockey Program who wishes to register as an officially sanctioned Hockey Alberta Pond Hockey Program. The intent of this document is to track the application and approval of Pond Hockey Programs on a year-to-year basis and to ensure that all Pond Hockey Programs are properly sanctioned through the process. Please note Pond Hockey Program sanctioning covers all scheduled practices, games and events between registered Pond Hockey players under registered supervision following Hockey Alberta Pond Hockey Guidelines.

-PLEASE PRINT-

MINOR HOCKEY ASSOCIATION I	NFORMATION (if applicable)		
Minor Hockey Association:			
President/GM Name:		Phone:	
President/GM Signature:		E-Mail:	
REQUESTING POND HOCKEY PRO	OGRAM:		
Pond Hockey Program Name: _			
Contact Person:		Phone:	
Alternate Phone:		E-Mail:	
POND HOCKEY PROGRAM MAILE *Please list the address where all		e sent*	
Address:		City:	
Postal Code:			
REGISTRAR INFORMATION (if diffe	erent than Contact Person):		
Registrar Name:		Phone:	
Alternate Phone:		E-Mail:	
Insurance Certificate is required	l, please contact Hockey Alb	or Hockey Association / Pond Hockey Program and Perta for a Certificate of Insurance Request Form. In Facility may request an updated certificate each ye	surance
By signing this Sanctioning agre guidelines of the Hockey Albert		nd Hockey Program agrees to comply and operate	within th
POND HOCKEY PROGRAM:			
Name:	Signature:	Date:	
HOCKEY ALBERTA:			
Name:	Signature:	Date:	

When completed, please return to:

HOCKEY ALBERTA

100 College Blvd, Box 5005, Room 2606 Red Deer, AB T4N 5H5

Fax: (403) 346-4277 E-Mail: info@hockeyalberta.ca