



**USA HOCKEY / HOCKEY CANADA
TEAM – PLAYER LIST AFFILIATION FORM**

THIS IS TO CERTIFY THAT THE _____
(Club, league, Association, etc)

THAT OPERATES IN THE: _____
(Division\Category)

IN _____
(City, Town, Village, etc.,)

IDENTIFIES THE FOLLOWING PLAYERS AS AFFILIATES FOR THE 2014-15 SEASON:

No	DOB (DD.MM.YR)	Player (Last, First)	Citizenship	Team	League
1					
2					
3					
4					
5					
6					

ALTERNATE

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Form acknowledged by Branch, Authorized Branch Official or Federation

Signature: _____

Date: _____

Title: _____

A copy of this form needs to be on file with Hockey Canada and USA Hockey.

USHL programs must submit this affiliate list to Marc Boxer (marcb@usahockey.org or fax 719-538-1160) prior to November 1 of the current season. This Affiliate Player List is part of the USAH/HC/CHL Transfer Agreement.