

NHAHA Player Release

Player Release Policy (Adopted September, 2012)

NHAHA has a player release policy for USA Hockey registered players who are registered thru NHAHA. This is a financial release only.

A player that is USA Hockey registered thru NHAHA must obtain a release when changing associations. This includes In-state to In State Releases, In-State to Out-of-State Releases and Out-of-State to In-state Releases.

A player over the age of 18 or a player's parent/guardian must complete a Player Release Form. Once submitted it must be approved by the NHAHA 2nd Executive Vice President, (In-State to In-State Releases OR In-State to Out-of-State) or the NHAHA Registrar, (Out-of-State to In-state Releases) before they can appear on any roster.

Rosters must be approved by the NHAHA Registrar to be used as official USA Rosters which include summer tournament, pre-season scrimmages, alternative leagues, and most importantly NHAHA games that lead to a State, Regional, Sectional, and/or National tournaments.

Any player failing to obtain a Release shall be suspended and ineligible until a player release is obtained.



AUTHORIZATION FOR PLAYER RELEASE

Player Name: _____ **D.O.B.** _____

Home Address: _____

Parent Signature: _____ **Date:** _____

Home Organization: _____ **Current Level/Tier:** _____

Release by Home Organization:

The above player has no outstanding financial obligation to _____ (Home Organization) and the above player is hereby released without recourse to the receiving organization named below.

Home Organization: _____

By: _____ **Date:** _____

Name: _____ **Title:** _____

Acceptance by Receiving Organization:

_____ (Receiving Organization) hereby agrees to accept the above named player as a member of our organization.

Receiving Organization: _____

By: _____ **Date:** _____

Name: _____ **Title:** _____

Non Objection by NHAHA:

The above player is not currently under suspension by the NH Amateur Hockey Association ("NHAHA") and NHAHA has no objection to the request for a player release.

NH Amateur Hockey Association

By: _____ **Date:** _____

Name: _____ **Title:** _____