# HOCKEY EASTERN ONTARIO MINOR APPLICATION FOR TRAVEL PERMIT

*The following team hereby makes application to take part in the following out-of Branch tournament/exhibition series.*

# TEAM AND TOURNAMENT INFORMATION

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Association Name |  | Submission Date |  | |  | | | | |
| Name and Division of Team |  | Sanctioned Tournament | | | yes |  | no | | |
| Name of Coach or Manager |  | Exhibition Series | | | yes |  | no |  |  |
| Address of above |  |  | | | | | | | |
| Telephone # of above |  |  | | | | | | | |
| Tournament Location & name |  | Tournament Date(s) | |  | | | | | |

**PARTICIPATING PLAYER ROSTER INFORMATION**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | **Jersey No.** | **Last Name** | **First Name** | **Birth Date** | **Hockey Canada Registration No.** | **Address** |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |
| 17 |  |  |  |  |  |  |
| 18 |  |  |  |  |  |  |
| 19 |  |  |  |  |  |  |

**PARTICIPATING TEAM MANAGEMENT ROSTER INFORMATION**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Last Name** | **First Name** | **Hockey Ca Registrati** | **nada on No.** |  | **Team Position** | **Address** |
| 1 |  |  |  | |  | |  |
| 2 |  |  |  | |  | |  |
| 3 |  |  |  | |  | |  |
| 4 |  |  |  | |  | |  |
| 5 |  |  |  | |  | |  |
| 6 |  |  |  | |  | |  |

It is hereby agreed that in consideration of this permit being issued, the above team shall abide by all rules and regulations as laid down by Hockey Canada, Hockey Eastern Ontario, and Hockey Eastern Ontario Minor.

|  |  |  |  |
| --- | --- | --- | --- |
| Association President Name |  | District Chair Name |  |
| Address |  | Signature |  |
| Signature |  | Date |  |

All travel outside the HEO Branch requires a travel permit. Note: Forward one signed copy to your District Chairperson.

This travel permit must be accompanied by the Official Team Roster

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