

**NEW YORK STATE AMATEUR HOCKEY
ASSOCIATION, INC.**

PLAYER RELEASE FORM

Revised 7/15/2004

INSTRUCTIONS FOR USE:

1. Player/Parent requesting release must have form filled out and submitted it to and approved by his/her current Association President prior to skating in tryouts, practices or games for new Association.
2. If Part 2 is **approved**, it must be presented at all tryouts and prior to committing to the new association.
3. If Part 2 is **disapproved**, player may not skate at tryouts of the new Association until the obligations, financial or otherwise are met or the appeal process has been undertaken.
4. If player/parent wish to appeal **disapproval** in Part 2, they may do so by forwarding the Player Release Form to their Section President along with letter of appeal.
5. If Section President upholds original Association's ruling, player/parent may then appeal to the NYSAHA Board of Directors thru the State President.

PART 1 – To be completed by requesting Player/Parent.

Date of Release Request: _____

Player's Name: _____ Date of Birth: _____

Home Address: _____ Phone: _____

PART 2 – To be completed by the Association President where the player is currently registered, or most recently registered. Part 2 **must** be completed in a timely manner, not to exceed 10 days.

On behalf of, and at the direction of the Board of Directors of the Chautauqua County Youth Hockey

Association, I, _____ hereby **APPROVE/DISAPPROVE** (circle choice) the above

named player to tryout, register, and play with another Association. The named player **HAS/HAS NOT** (circle

choice) met all obligations, financial or otherwise

with our Association.

President's Signature

Date
