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I, \_\_\_\_\_, currently registered with the \_\_\_\_\_ (Team) agree to affiliate with the \_\_\_\_\_. In signing I understand the eligibility requirements and the regulations as they are outlined within the Hockey Manitoba Handbook.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Player's Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_ (mm/dd/yy)  
Player's birthday

\*\* The above named teams both accept the affiliation of this player and understand the regulations governing this affiliation agreement. Please refer to the Hockey Manitoba Handbook for a complete outline of these regulations. As team officials, we shall be in contact always when dealing with the affiliation of this player. We understand that the above player is released from this agreement on completion of the current season.

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Current Roster Team

\_\_\_\_\_  
Official's Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Affiliate Team

\_\_\_\_\_  
Official's Signature

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Branch Approval