

# 2021-22 JUNIOR TEAM AFFILIATION LIST



**HOCKEY SASKATCHEWAN**  
 #2-575 Park St Regina, SK S4N 5B2  
 Ph:789-5101 Fax: 789-6112

TEAM NAME: \_\_\_\_\_

LEAGUE: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_

	LAST NAME	GIVEN NAME	BIRTHDAY (MM/DD/YYYY)			TEAM REGISTERED WITH	DIVISION/ CATEGORY	APPROVED BY COACH OF REGISTERED TEAM (signature)
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								
16.								
17.								
18.								
19.								

Mgr/Coach Name (Please print): \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_

**HOCKEY SASKATCHEWAN APPROVAL:**

Date: \_\_\_\_\_

**\*NOTE: IF ADDING TO A PREVIOUSLY APPROVED LIST, YOU MUST INCLUDE ALL AFFILIATES FOR THE TEAM\***  
**\*\*MUST BE FILED PRIOR TO USING AN AFFILIATE PLAYER...CHANGES TO THE FILED LIST MAY BE MADE UNTIL JAN 10<sup>TH</sup>, 2022\*\***