

# 2021-22 SENIOR 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 (Signed by Coach of registered team)
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								
11.								
12.								
13.								
14.								
15.								
16.								
17.								
18.								
19.								

Mgr/Coach Name: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ (Email): \_\_\_\_\_  
 Signature: \_\_\_\_\_

**HOCKEY SASKATCHEWAN APPROVAL:**  
 \_\_\_\_\_  
 Date: \_\_\_\_\_

**\*\*MUST BE FILED PRIOR TO USING AN AFFILIATE PLAYER...CHANGES TO THE FILED LIST MAY BE MADE UNTIL JAN 10<sup>th</sup>, 2022\*\***

**\*NOTE: IF ADDING TO A PREVIOUSLY APPROVED LIST, YOU MUST INCLUDE ALL AFFILIATES FOR THE TEAM\***