



## ***ELITE FEMALE NOTIFICATION OF TRY-OUT FORM***

*For U18 AAA, U18 AA and U15 AA only*

This completed form must be presented to each team that the player is trying out for before she/he is eligible to participate in the try-out camp. It is understood by all parties that should the player be chosen as a member of the designated team, the Elite Team will notify the League and the player's Resident LMHA. If the player does not make the Elite Team, it is the player's responsibility to notify his/her Resident LMHA whether or not he/she is returning or wishing to access an additional try out.

### **PLAYER INFORMATION**

Player Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
mm dd yyyy

Resident MHA: \_\_\_\_\_

Address: \_\_\_\_\_ Legal Land Description: \_\_\_\_\_

Town/City: \_\_\_\_\_, AB Postal Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Respect in Sport Certificate #: \_\_\_\_\_ Expiry Date: \_\_\_\_\_

### **TRY-OUT INFORMATION**

Level of Hockey:  U18 AAA  U18 AA  U15 AA

First Try-Out: \_\_\_\_\_  Selected  Cut  
(Name of Team)

Second Try-Out: \_\_\_\_\_  Selected  Cut  
(Name of Team)

### **AUTHORIZATION SIGNATURES**

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Hockey Calgary Executive Director (or designate)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date