

PLAYER TRANSFER FORM FOR RESIDENTIAL MOVES

25 Brodie Drive, Unit 3, Richmond Hill, Ontario L4B 3K7

SUBMIT COMPLETED FORM AND ALL SUPPORTING DOCUMENTS TO YOUR NEW MINOR HOCKEY ASSOCIATION. NOTE: Change of address is not required if within the same Association and should be reported to: OMHA Office, Attention Membership Services.

Player's Name:		Date of Birth:	
Previous Association:			
Previous Address:		a 11	
	Street	City	Postal Code
Former Telephone #:		Resided at this address since: (Month/Year)	
New Association:			
New Address:			
	Street	City	Postal Code
New Telephone #:		*Did Parents Move at the Same Time:	
*If parants did not move a	t the same time :	as the player an explanation must accompany this	application
"In parents did not move a	it the same time of	as the player an explanation must accompany this	application.

If the player participated in AAA programing in the previous season this form must be signed by the AAA organization.

Name of AAA Association

Authorized Signature

Print Name of Authorized Signature

ALL SUPPORTING DOCUMENTS ARE REQUIRED TO BE INCLUDED WITH THIS APPLICATION:

- Official Confirmation of School Enrolment
- Letter to School Authorizing the OMHA to Check on and Confirm Enrolment During the School Year
- Copy of Fully Executed Agreement of Purchase and Sale, Registered Transfer of Ownership or Rental Agreement
- Copy of Parent(s)' Updated Driver's Licence(s)
- Copy of a Utility or Similar Bill (i.e. Hydro, Telephone, Cable, Credit Cart, etc.) Demonstrating the Parent(s)' Name and New Address
- □ If Applicable, an Executed Copy of any Relevant Separation Agreement, Custody Order or Divorce Decree

Declaration: The undersigned hereby declare that all of the above information is true and correct. We are aware of the rules and regulations regarding eligibility for minor hockey programs in the OMHA. We also recognize that the falsification of any registration document will result in the suspension of a minimum of one (1) year to a maximum of three (3) for the above player and any team officials involved as per OMHA and OHF Regulations.

PARENT SIGNATURE: (Player if 18 years of age) ______

PARENT NAME: _____

____ DATE:____

Note: Current OMHA, OHF & HC Registration Eligibility Regulations apply.

PRIVACY STATEMENT: The information requested on this form is required by the Ontario Minor Hockey Association (OMHA) and the Ontario Hockey Federation (OHF), and their respective executives, employees, coaches, trainers, referees and volunteers, for registration purposes and to administer the rules and regulations of the OMHA, and to provide notification of any upcoming events or other activities. In order to do so, the OMHA, its Member Associations, OHF and Hockey Canada may, if required request proof of a player's identity, address and date of birth.