



AFFILIATION DECLARATION



ASSOCIATION / TEAM / CLUB NAME: _____

The above Association / Team / Club hereby declares the following affiliation for the year noted above:

CLUB SYSTEM AFFILIATION (must have common signing officers)

Name of Association: _____

Junior Team part of club? Yes No

If yes, Name of Junior Team: _____

TEAM-ON-TEAM AFFILIATION

Name of Affiliate Team (lower age division/category):

Signing Officers approval of Affiliate Team:

President (print name)

Secretary (print name)

SPECIALLY AFFILIATED PLAYERS LIST (up to 19 players)

*Affiliation at Large List must be forwarded to the NOHA Office by January 15th or earlier. This form **MUST** be completed in full with written consent (signing officers) from both teams involved in the affiliation.*

Affiliation Declaration **must** be completed and forwarded to the NOHA Office **by October 15th or earlier**. Failure to comply may result in loss of affiliation privileges for the season.

All teams must be given a copy of this Affiliation Declaration and it must be available for verification upon request.

Affiliation regulations are in the NOHA Constitution (Regulation 7) and the HC and OHF Rules & Regulations.

Signing Officers for the Association:

Name: _____	Name: _____
Signature: _____	Signature: _____
Position: _____	Position: _____
Date: _____	Date: _____

For NOHA Office Use Only:

Approved: _____ Rejected: _____ Date : _____