



# ELITE FEMALE NOTIFICATION OF TRY-OUT FORM

For Midget AAA, Midget Elite and Bantam Elite 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: \_\_\_\_\_ Resident MHA: \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Player's D.O.B.: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

## TRY-OUT INFORMATION

Level of Hockey:  Midget AAA  Midget Elite  Bantam Elite

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

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

## AUTHORIZATION SIGNATURES

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
MHA President Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date