



IDAHO AMATEUR HOCKEY  
ASSOCIATION  
RELEASE

**Player Information:**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Association: \_\_\_\_\_ Team Name: \_\_\_\_\_

Age division of last team: \_\_\_\_\_ (Mite Squirt Peewee Bantam Midget U16 Midget U18)

Head Coach: \_\_\_\_\_ Season Played: \_\_\_\_\_

I, \_\_\_\_\_ as parent/guardian of \_\_\_\_\_

am requesting him/her to be released from \_\_\_\_\_. To the best of our knowledge, we have satisfied all of our financial obligations to this organization and are aware of no unresolved disciplinary issues.

Signature Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

Response must be made in writing within 10 days of receipt of this request.

**Release Approved:**

\_\_\_\_\_ has satisfied his/her financial obligations, has no unresolved disciplinary issues and is released to: \_\_\_\_\_.

Signature/Title: \_\_\_\_\_ Date: \_\_\_\_\_

**Release Denied:\***

\_\_\_\_\_ is denied release from this organization due to the following reasons: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

Signature/Title: \_\_\_\_\_ Date: \_\_\_\_\_

Contact for questions: \_\_\_\_\_ Phone #: \_\_\_\_\_

\*Please note: If this request is denied, the applicant may appeal to: IAHA