



REQUEST FOR MINIMUM GAME PARTICIPATION
EXEMPTION DUE TO INJURY

This form shall be submitted by the PIHL Association representing this player. You must also include a written release from the player's doctor on their letterhead, indicating the date released. Without this release from the doctor, an exemption cannot be considered. Submit both documents to Gregg Kaminski(associate@pihlhockey.com) and Jack Kukan (southvp@pihlhockey.com) Requests must be received a minimum of 48 hours before the post-season meeting as established by the league.

Players Name: _____ Grade: _____

Team Name: _____ Level: _____
(Var-JV-MS)

Injury/Illness: _____

Date of Injury/Illness: _____

Unable to play from: _____ To: _____

Date Released to play: _____ Number of games played: _____

Physician's Name: _____

Submitted by: _____

Date: _____ Position: _____
(President, Manager, etc.)