



# Morgantown



**Hockey Association**  
PO Box 154, Dellslow, WV 26531-0154

## 2021 – 2022 Travel Hockey Petition to Permit My Child to Play Up To The Next Age Group (Permitted for only the following birth years: 2007, 2009, 2011)

**Print Name of Participant:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Recommended Age Classification:**  10U - Squirt (9, 10 - 2011, 2012)  
Squirt through Bantam is per USAH  12U - Pee Wee (11, 12 – 2009, 2010)  
(Select only one, based upon your child’s birth year)  14U - Bantam (13, 14 – 2007, 2008)

**Previous Coach or Coach of Recommended Age Classification:** \_\_\_\_\_

**Requested Age Classification:**  12U - Pee Wee (11, 12 – 2009, 2010) Print & Signature  
Player may only petition to play up one age classification (Select only one)  14U - Bantam (13, 14 – 2007, 2008)  
 16U/18U - Midget (15-18 – 2003-2006)

**Coach of Requested Age Classification:** \_\_\_\_\_  
Print & Signature

\* Per PAHL Rules, 2013 birth years or later (8 and under) must play PAHL Mite Jamboree (cross-ice) Hockey.

**Justification / Comments:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Signatures:**

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(If participant is less than 18 years of age)

**Parent/Guardian Name (print):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

\*\*\* The PAHL Liability Waiver Form must also be submitted \*\*\*

**PAHL Risk Acknowledgment and Liability Waiver  
For Players Playing Up To The Next Age Group**

**Print Name of Participant:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

I hereby acknowledge that I have petitioned, in writing, the Directors of the \_\_\_\_\_ (association) to permit my child to participate at an age level that is one year in age above USA Hockey's recommended guidelines.

I understand that the PAHL recommends that players stay in the age groupings defined by USAH and stipulated in the USAH Annual Guide as appropriate for their birth year.

I understand and appreciate that the risk of injury may be greater and that the risk of injury from hockey is significant, including the potential for permanent paralysis and death, and while particular rules, and personal discipline may reduce this risk, the risk of serious injury does exist.

By my child's participating, I KNOWINGLY ASSUME ALL SUCH RISKS, both know and unknown. Further, I agree to indemnify and hold the \_\_\_\_\_ (association) and the PAHL, its officers, and USA Hockey, Inc., harmless from any and all liability, loss, expense, attorney's fees, or claims for injury or damages caused as a result of my request.

I understand that the agreement by my association to move my child to the next higher age group is probationary and my association reserves the right to reverse its decision if it is felt that my child is not capable of participating at the higher age level when his/her performance is observed in actual game situations by the coaches and/or the association coaching director.

**Signatures:**

**I understand and agree to respect all these conditions of participation in USA Hockey programs.**

**Participant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**(If participant is under 18 years of age)**

**Parent/Guardian Name (print):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_