



AYHA Playership Application

All information is confidential.

1. Player Name

First Name

Last Name

2. Date of Birth

MM

DD

YY

3. Parent/Guardian Name

First Name

Last Name

4. Mailing Address

Street

City

State

Zip Code

5. Names & Birth Years of Other Players in the AYHA

First Name

Last Name

Birth Year

First Name

Last Name

Birth Year

6. Youth Player: Please state, in your own words, why you want to play ice hockey.

7. Parent/Guardian: Please state, in your own words, what you hope your player will gain from playing ice hockey.

8. Parent/Guardian: Please describe any financial circumstances you would like the AYHA Playership Committee to consider that may not be reflected by the income tax return and other financial documentation.

9. Parent/Guardian Signature

Date of Signature

MM

DD

YY



AYHA Playership Financial Need Documentation

Enclose this sheet, a copy of your household's Federal Income Tax Return from last year, and supporting financial documentation in a sealed envelope. ***Please note that no members of the AYHA Board or staff will view this sheet, any tax documents, or other supporting documentation within the sealed envelope. The envelope is forwarded to the AYHA's certified public accountant, who is the only individual authorized to view and confirm financial need.***

All tax and financial documents remain confidential with the accountant, who will destroy the documents once the playership evaluation is complete and a recommendation sent to the AYHA committee (no financial details are provided to the committee).

1. Player Name

First Name

Last Name

2. Parent/Guardian Name

First Name

Last Name

3. Number of Family
Members in Household

4. Number of Family
Members Playing in AYHA

5. Last Year's Reported Adjusted Gross Income

6. Last Year's Number of Dependents Claimed

7. Does Your Household Current Receive Government Assistance (enclose a copy of any assistance received)?