Dual Roster and Player Up Request Form

Updated 9/15/2025



Dual Roster - You are requesting permission for your child to play on two Pinedale Glaciers Hockey teams for the upcoming hockey season.

Playing Up - Younger players move up to the next division for the upcoming hockey season.

The Board does not promote dual rostering players or moving players up except for special circumstances. The final decision will be at the discretion of the board with input from division coaches and based on PHA need.

Before requesting to dual roster or moving your child up to the next level, please consider your child's maturity, size, coordination, muscular development, attitude, and social development in comparison to the team members of the older team.

RULES:

- All requests must be made within the first three weeks of practice.
- Up to coach's discretion, players MAY have to attend practices for both teams for at least 2 consecutive practices so coaches and the player can evaluate the following: skills, size, coordination, and player safety.

Procedure for Dual Roster and Playing up

- Parents fill out the Parent Portion of the Dual Roster or Playing Up Form.
- Email it to PHA president@pinedaleglaciers.org
- PHA will email it to coaches involved.
- Coaches will fill out paperwork, email it to PHA.
- PHA will notify parents of decision.

Dual Roster or Playing Up Request

PARENT PORTION

I am requesting my child to: DUAL ROSTER	PLAYING UP	_ (please X)
Name of Player:	Date of Birth	·
I, as a parent/guardian of the above named player to be allowed to play hockey with older hockey skills are more advanced and whose pl	r, usually more physic	ally developed players whose
Current Age Appropriate Division (please circ	le one)	
Mini (U6) / Mite (U8) / Squirt (U10) / Peewee	(U12) / Bantam (U14) / Midgets (U18) / Girls
Upper Division For Dual Rostering or Playing	Up (please circle one	e)
Mini (U6) / Mite (U8) / Squirt (U10) / Peewee	(U12) / Bantam (U14) / Midgets (U18) / Girls
If Dual Rostering, the priority team I would like	e to suggest will be: _	
I, as parent/guardian, I am requesting that my following reasons:	player be allowed to	Dual Roster or Playing Up for the
I, as parent/guardian of the above-named play move up to the next level. In requesting permi responsibility should my child be injured, no m will not hold Pinedale Hockey Association liabl	ission, I release the P natter how seriously,	inedale Hockey Association from all while a member of either team, and
Parent/Guardian Signature	Date	
Dual Roster - PHA will designate the team	that will be your at	:hlete's priority team in the event

Player Up - If approved, the player will be required to pay the full registration fee for the team they will be playing on.

of any scheduling or game time conflicts. Failure to do so may result in revocation of dual rostering permission by the board. If approved, the player will be expected to attend ALL

practices for both teams, and pay full registration fees for both teams.

Dual Roster or Playing Up Request

COACHES FORM

Name of Player:
Requesting to: DUAL ROSTER PLAYING UP (please X)
Current Age Appropriate Division (please circle one)
Mini (U6) / Mite (U8) / Squirt (U10) / Peewee (U12) / Bantam (U14) / Midgets (U18)
Age Appropriate Coach Opinion on Skill, Size, Appropriateness of Dual Rostering or Playing Up Request:
I approve or disapprove this movement.
Coach SignatureDate
Division Team Requested: (circle appropriate one)
Mini (U6) / Mite (U8) / Squirt (U10) / Peewee (U12) / Bantam (U14) / Midgets (U18) / Girls
Division Coach Opinion on Skill, Size, Appropriateness of Dual Rostering Request:
I approve or disapprove this movement.
Coach SignatureDate

BOARD APPROVAL _____ BOARD DECLINE _____ Date ____