



Exhibition Game

PO Box 302, 40 Enman Crescent, Charlottetown, PE C1A 7K7
 Ph: 902-368-4334 Fax: 902-368-4337

Team Name: _____ Date Game: _____ Location: _____

League: _____ Category: _____ Versus: _____

Print clearly and complete all portions of the form.

	Player's Name	Position	Import (if yes, branch name)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Team Officials

	Name	Official Role
1		
2		
3		
4		
5		

******IMPORTANT****** This form must be completed in full, signed by a team official and returned to Hockey PEI office for approval before commencement of any exhibition game. Any participating players, who last played outside of PEI, must have an inter-branch transfer application submitted and approved by Hockey PEI prior to participating in any game. Hockey PEI Registered Officials must be used in all sanctioned events.

INCOMPLETE FORMS WILL BE RETURNED. FAILURE TO ABIDE BY HOCKEY PEI REGULATIONS MAY RESULT IN SANCTIONS.

Team Signature: _____

FOR OFFICE USE ONLY: Date Received: _____

Hockey PEI Authorization: _____ Date: _____