

CHANGE OF PERMANENT RESIDENCE

To Whom It May Concern	,
 	have moved from :
(1.6	nent s Name)
Address:(former resident	City:
Province: (former residence)	ential address) Postal Code:
Former Branch or Zone of	f HNO:
То:	
Address:(present residential	City:
	Postal Code:
Home Phone:	New HNO Zone:
With my son/daughter	(Player's name and birth date)
order and according to	(Player's name and birth date)
wno piayed with	(Minor Hockey Association)
last season.	(Millor Hockey Association)
	Date:
	Parent's Signature:

(PLEASE INCLUDE A PHOTOCOPY OF THE PLAYER'S BIRTH CERTIFICATE)

GOVERNMENT IDENTIFICATION AND A UTILITY BILL CAN BE REQUESTED TO VERIFY NEW RESIDENCEY