



**Massachusetts Hockey**  
**APPLICATION FOR ROSTER CHANGE**  
**2007 - 2008**

Complete and send to your District/Divisional Registrar with fee from the list below no later than the last Playdown game of the District for this team. Form and fee from the Registrar must be in the hands of the STC by February 22, 2008. This form must be attached to an Electronic Supplemental Roster or a paper IMR.

NOTE: ONE FORM PER ROSTER CHANGE

Date: \_\_\_\_\_ District #: \_\_\_\_\_ MAH #: \_\_\_\_\_

Association/Program Name: \_\_\_\_\_

Change to be made: (circle one)      Bench Official                                  Player                                  Goalie

Classification: (circle one) YOUTH      MITE              SQUIRT              PEEWEE              BANTAM              MIDGET

Tier: (circle one)      TIER I      TIER II NB      TIER II – L      TIER II – S      TIER III      TIER IV

GIRLS      U10      U12      U14      U16      U19  
 WOMEN      A      B      C

Name to be added: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name to be deleted: \_\_\_\_\_

Circle Change and Fee as Listed Below:

CHANGE TYPE	Non Tournament Bound Teams	Up to last Playdown Game of this team.	Bench Official or Alternate Goalie Only after last Playdown Game
Change/Add Bench Official	\$0.00	\$50.00	\$50.00
Alternate Goalkeeper R&R Art. VIII Section II-A	\$0.00	\$0.00	\$0.00
Transfer Goalkeeper	\$0.00	\$50.00	
Add Goalkeeper	\$0.00	\$100.00	
Transfer Player	\$0.00	\$50.00	
Add Player	\$0.00	\$100.00	

Player Roster Changes for National Bound Teams will not be accepted after December 31<sup>st</sup>

Association Representative Signature: \_\_\_\_\_ Date: \_\_\_\_\_

District Registrar Signature: \_\_\_\_\_ Date: \_\_\_\_\_

SCTC Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Fee Paid: \_\_\_\_\_