



WGHA TRYOUT BYPASS ACKNOWLEDGEMENT AND AGREEMENT

This Tryout Bypass Acknowledgement and Agreement (the "Agreement") is entered into for the ___ / ___ season between the Waterloo Girls Hockey Association ("WGHA") and the undersigned player and parent/guardian.

Purpose

The purpose of this Agreement is to document and confirm a tryout bypass has been granted in accordance with WGHA Manual of Operations MO-06-07: Player Status. This Agreement is intended to support transparency, fairness, and consistency in the application of WGHA policy, while acting in the best interests of the athlete and the Association.

Acknowledgements

By signing this Agreement, the Player and Parent/Guardian acknowledge and agree that:

- Prior to the commencement of WGHA tryouts, the Player and family engaged in direct communication with the Executive Director &/or appropriate deligate, AND Head Coach of the WGHA team(s) the Player intended to try out for.
- The Player has not and will not attend any WGHA tryout sessions for the applicable season.
- The Player has requested and been granted a tryout bypass and has signed a Tryout Bypass Acknowledgement & Agreement in accordance with MO-06-07.

Conditions

The Player and Parent/Guardian further acknowledge and agree to the following conditions:

- This Tryout Bypass Acknowledgement & Agreement is approved by the WGHA Executive Director and/or the appropriate Board of Directors Liaison.
- To retain Non-Import status with WGHA, the Player must subsequently register and play within the applicable and noted WGHA level / team within another association at the same level or higher for the applicable season.
- This Tryout Bypass applies for one (1) season only and does not create any precedent, guarantee, or entitlement for future seasons.
- Any future participation, bypass, withdrawal or release requests shall be subject to the applicable WGHA policies in effect at that time.
- Failure to meet the conditions outlined in this Agreement may result in reclassification of the Player as an Import for future WGHA tryout purposes.

No Waiver

This Agreement does not waive, amend, or supersede any other WGHA policy, nor does it obligate WGHA to grant similar requests in the future.

Confirmation

By signing below, the undersigned confirm that they have read, understand, and agree to the terms of this Agreement.



Details / Reason:

WGHA Age(s):

WGHA Level(s):

Family / Player Notes:

WGHA Notes:

Player Name: _____

Player Signature: _____ Date: _____ (18 and over)

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

WGHA Head Coach (Acknowledgement):

Name: _____

Signature: _____ Date: _____

WGHA Executive Director:

Name: _____

Signature: _____ Date: _____

WGHA Executive Director Delegate (if applicable):

Name: _____

Signature: _____ Date: _____