

TRAVEL PERMIT
OREGON STATE HOCKEY ASSOCIATION

SUBMIT AT LEAST TWO (2) WEEKS IN ADVANCE OF THE GAME BY MAIL OR FAX TO:

Oregon State Hockey Association
4840 SW Western Avenue, Suite 7000
Beaverton, OR 97005-3430
p: 503-526-1713 * f: 503-293-4031
email: oshatreasurer@comcast.net

Date Submitted: _____

Team Name: _____ Division: _____

Opposing Team Name: _____

Opponent's City: _____ State/Province: _____

Game Date _____ Time: From _____ To _____ Rink _____

Game Date _____ Time: From _____ To _____ Rink _____

Game Date _____ Time: From _____ To _____ Rink _____

Game Date _____ Time: From _____ To _____ Rink _____

Signature

Position

Printed Name

Email address (please print legibly)

Street Address, City, State & Zip Code

Phone number where you can be contacted

*****PLEASE PRINT CLEARLY IN BLUE OR BLACK INK OR TYPE REQUEST*****

OSHA WEBSITE: http://edit.usahockey.com/oregon_state_hock111