



**FORT WAYNE AMATEUR HOCKEY ASSOCIATION TRAVEL PARTICIPANT PLAY-UP POLICY
(5/3/2017)**

The Board of Directors recognizes that in rare and specific cases it can be appropriate and even beneficial to a participant’s development for him or her to play-up to the next age classification to play hockey. A fine balance needs to be struck, however, to avoid placing the desire of a participant above the legitimate opportunity for that participant to be successful in an older age classification.

There is an increased risk of injury for participants playing outside of their designated age classification. However, USA Hockey allows the movement in certain situations if specific guidelines are followed. You should carefully consider the increased risk involved and follow the guidelines below when making a request to move a participant into an older age classification.

Birth Year Approach:

- ✓ Each child tries out in their birth year (may not determine final team placement).
 - ✓ During tryout, each child is evaluated against their peers.
 - ✓ Tryout should test skill and game sense.
 - ✓ Balance low numbers while creating most competitive team in each birth year.
 - ✓ Allow teams to compete in birth-year only programs.
- Players may request to try out for teams that are one birth year above their actual playing age as follows:

Example:

Birth Year	Required to Tryout For	Can Request Play Up To
1999	18U	N/A
2000	18U	N/A
2001	16U	18U
2002	16U	18U **
2003	14U Major	16U
2004	14U Minor	14U Major
2005	12U Major	14U Minor
2006	12U Minor	12U Major
2007	10U Major	12U Minor
2008	10U Minor	10U Major
2009	8U	N/A
2010	8U	N/A

** Double year play-ups require careful evaluation and play-ups will be granted only in rare circumstances.

- Players will be considered based on talent within a players age group. (Exceptional players move up).
- Following tryouts, players who have been approved to move up to the next age group, will be considered based on their evaluation performance.
- If it is deemed that one or two players have considerable ability and maturity over those of their peers, then they may be eligible to move up.
- If it is determined that there are a significant number of players within an age group at the top of the ranking, then none of these players will be eligible to move up, thus building the strongest possible team in that birth year.

Approved May 3, 2017



- Factors to be considered in this assessment include skating ability, passing, puck-control, shooting, positional play and, where appropriate, checking. Other factors may be considered as to the player's demonstrated level of maturity such as willingness to take instruction and direction, leadership qualities, ability to handle criticism, and respect towards others. Goalies are special cases and will be evaluated on a need basis when the circumstances arise
- Only requests submitted to the Coaching and Player Development Director or Travel Commissioner in writing by the participant's parents or legal guardians will be considered. This request must be submitted prior to the designated tryout date.
- Allowing participants to move from a non-checking division to a checking division represents the greatest risk and will only be granted under rare circumstances.
- If a participant that has moved up is experiencing difficulty, as determined by FWAHA the decision allowing the participant to play-up may be reversed. In this case, every attempt will be made to place the participant on a similar level team within the participant's proper age classification. There are no guarantees that the participant will be placed on another team. Parents and players should carefully consider this outcome prior to making a request to play-up.
- The participant's parent(s)/guardian must sign a specific Risk Acknowledgement and Liability Waiver, in a form acceptable to the FWAHA Board, acknowledging the risks associated with playing outside of a participant's proper age classification.

This policy is intended as guideline. In all cases the FWAHA reserves the right to determine the final team placement of any player that is in the best interested on his/her development in accordance with our mission and values. If you have any question about this policy, please contact the Coaching and Player Development Director or the Travel Commissioner.



FWAHA Risk Acknowledgment and Liability Waiver for Players Requesting a Play Up

Print Name of Participant: _____

Birth date: _____ (MM/DD/YYYY)

I/We _____, parent(s) or legal guardian(s) of the above named player, request that he/she be permitted to Play-Up one year from that of their birth year. I have read and understand the Fort Wayne Amateur Hockey Association Travel Participant Play-Up Policy and agree to all the terms, conditions and eligibility requirements that apply.

I understand that requesting a play up does not guarantee the ability to make a team and understand that even if a player makes a play up team, FWAHA reserves the right to reverse that decision for any reason at any time. I assume the risk that if the player is not chosen for the play up team or is subsequently removed from the team; he/she is potentially forfeiting the ability to play on a travel team for the current age division.

I understand that the FWAHA recommends that players stay in the age groupings defined by USA Hockey and stipulated in the USA Hockey Annual Guide as appropriate for their birth year. I understand and appreciate that in playing up, the risk of injury may be greater and that the risk of injury from hockey is significant, including the potential for permanent paralysis and death, and while rules and personal discipline may reduce this risk, the risk of serious injury does exist.

By my child's participating, I KNOWINGLY ASSUME ALL SUCH RISKS, both known and unknown. Further, I agree to indemnify and hold FWAHA, its officers, Mid-Am Hockey and USA Hockey, Inc., harmless from any and all liability, loss, expense, attorney's fees, or claims for injury or damages caused as a result of my request.

I understand and agree to accept these conditions of participation.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____