



TRAVEL PERMIT

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

Lester Sparks|OSHA President

Email: lestersparks33@yahoo.com

Phone: 971.219.6367

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)