



2025 TEAM ENTRY FORM

**USA HOCKEY
SOUTHEASTERN
DISTRICT
TOURNAMENT
CHAMPIONSHIP**



Team Name: _____

Age Classification: Tier I Youth: 13O 14U 15O 16U 18U
Tier I Girls: 14U 16U 19U
Tier II Girls: 14U 16U 19U

Representing which Affiliate? CAHA
 PVAHA
 SAHA
 SAHOF

Team Record: Win _____ Loss _____ Tie _____

Head Coach: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: (____) _____ Evening Phone: (____) _____

Email: _____

Team Manager: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: (____) _____ Evening Phone: (____) _____

Email: _____

Does your team have home and away jerseys? Yes No

Team Home Colors: _____

Team Away Colors: _____

Will your team attend with two (2) goaltenders? Yes No

TIER I YOUTH: Please email this form to Paul Duquette,
paul.duquette@usahockey.org

GIRLS ONLY: Please email this form to Cindy Friedman,
cin24K@aol.com