



## National Collegiate Roller Hockey Association

c/o Brennan Edwards  
PO Box 703  
Arrington, TN 37014  
p: (310) 753-7285  
f: (310) 347-4001

# Player Enrollment Verification

Dear Registrar:

In order to better serve our members, the National Collegiate Roller Hockey Association has created a verification process to ensure that all participating NCRHA members conform to the NCRHA's eligibility standards. You will find the requirements below, along with explanations of fields on the attached form.

- An official school raised seal or ink stamp must be visible in the designated area at the bottom-right of the attached form.
- The form must be signed and dated by the registrar or an authorized school official.
- Any unmarked rows must be clearly crossed out to prevent addition of players after the signature and stamp have been affixed.
- To prevent tampering, please mail directly to the address listed **BELOW**.
- Due Dates are as follows:
  - October 15, 2024 (or 72 hours before your first game, per your Conference's requirements)
  - February 1, 2025 (or 72 hours before your first game, per your Conference's requirements)

If you have any questions or concerns, please do not hesitate to contact the league office. Thank you in advance for your consideration and cooperation!

**Note to Team Representative: This form must be completed once per quarter/semester.**

Please mail completed Enrollment Verification Form to the proper Conference below:

**ECRHA**  
PO Box 97  
Riverview, FL 33568  
(336) 462-8753

**Great Plains**  
5548 Old Pond Dr.  
Dublin, OH 43017  
(614) 738-4954

**MCRHL**  
5548 Old Pond Dr.  
Dublin, OH 43017  
(614) 738-4954

**SCHL**  
5172 N Colony Blvd.  
The Colony, TX 75056  
(940) 390-6739

**SECRHL**  
2825 South Main St. NW #321  
Kennesaw, GA 30144  
(404) 229-2562

**WCRHL**  
PO Box 703  
Arrington, TN 37014  
(310) 753-7285

Sincerely,

Brennan Edwards  
Executive Director  
National Collegiate Roller Hockey Association



# National Collegiate Roller Hockey Association

c/o Brennan Edwards  
PO Box 703  
Arrington, TN 37014  
p: (310) 753-7285  
f: (310) 347-4001

## Player Enrollment Verification (2024-2025)

The NCRHA requires that all participants conform to strict eligibility guidelines. The league requires the following information before any member may participate. If a student has dropped from enrollment or has amended his/her number of credit hours since the beginning of the semester, please indicate the most current total of **ACTIVE** credit hours. **An official school raised seal or ink stamp must be visible in the box at the bottom right of this form. This form must be signed and dated by either the registrar or an authorized school official. Any and all empty rows must be crossed out to prevent addition of players after completion of the form. To prevent tampering, please mail the completed form to the league address listed above.** Thank you for your cooperation!

College or University: \_\_\_\_\_

Last Name	First Name	Student ID #	Student Sign.	# Credits	Registrar Initials
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					

### Registrar

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Affix School  
Seal/Stamp Here