



REGISTRATION FORM

2010 - 2011 SEASON

Male Female

PLAYER'S INFORMATION	MOTHER'S INFORMATION	FATHER'S INFORMATION
NAME _____	NAME _____	NAME _____
Address _____	<input type="checkbox"/> Same	<input type="checkbox"/> Same
Legal Land Description _____		
City _____	<input type="checkbox"/> Same	<input type="checkbox"/> Same
Postal Code _____	<input type="checkbox"/> Same	<input type="checkbox"/> Same
Home Phone Number _____	<input type="checkbox"/> Same	<input type="checkbox"/> Same
Birthday DAY _____ Month _____ Year _____	Cell: _____	Cell: _____
PHN / AHC# (new players only) _____	EMAIL ADDRESS: _____ (receipts are sent to the email listed on this form)	

** SPECIAL FAMILY RATE: 10% Discount (3 registrants) 20% Discount (4 registrants)

August registration rate will be increased by \$25.00 and September rate will be increased by \$100.00

GENERAL PROGRAM			
Categories	Year Eligible	Check	AUG REGISTRATION FEE
Initiation	Born 2004, 2005	<input type="checkbox"/>	\$250.00
Novice	Born 2002, 2003	<input type="checkbox"/>	\$365.00
Atom	Born 2000, 2001	<input type="checkbox"/>	\$475.00
Pee Wee	Born 1998, 1999	<input type="checkbox"/>	\$550.00
Bantam	Born 1996, 1997	<input type="checkbox"/>	\$600.00
Midget	Born 1993, 1994, 1995	<input type="checkbox"/>	\$625.00

FEMALE HOCKEY			
Atom/Novice	Born 2000, 2001, 2002, 2003	<input type="checkbox"/>	\$365.00
Pee Wee	Born 1998, 1999	<input type="checkbox"/>	\$515.00
Bantam	Born 1996, 1997	<input type="checkbox"/>	\$575.00
Midget	Born 1993, 1994, 1995	<input type="checkbox"/>	\$625.00

I, the undersigned certify the information to be true and in consideration of the granting of this certificate to me, with the privileges incident thereto, and by signing this certificate I have become subject to the rules, regulations and decisions of Hockey Canada, its Board of Directors, its Branches and/or divisions which may be restrictive in some areas such as movement from team to team, conduct, etc. and I agree to abide by such rules, regulations and decisions of Hockey Canada, its Board of Directors, its Branches and/or divisions. Further, the information requested above is required by Hockey Canada and CMHA to facilitate hockey programs on behalf of the registrant and Hockey Canada. Hockey Canada will treat this personal information with the utmost respect and in accordance with the Hockey Canada Privacy Policy at all times. Hockey Canada does not sell, trade or otherwise share information we collect outside our Branches and Associations, however we may from time to time use this information for the purposes of offering additional services, promotions, including promotions offered by third parties, and/or hockey specific research.

This type of usage of personal information by Hockey Canada, its Branches and/or associations is entirely at your discretion, should you allow this type of usage please check the box here

The above named player has my permission to play Minor Hockey and I relieve all organizing officials and governments from all responsibility for injury or accident to the above while participating.

_____	_____	
Date	Parent/Guardian - Signature	
OFFICE USE ONLY		
<input type="checkbox"/> Receipt emailed	<input type="checkbox"/> Transfer in process	<input type="checkbox"/> Cash
<input type="checkbox"/> Mail Receipt		<input type="checkbox"/> Cheque
<input type="checkbox"/> Entered in Database		<input type="checkbox"/> Amt: