



PLAYER INFORMATION

Grey Highlands Shooting Stars Girls Hockey

NAME: _____ **BIRTH DATE:** ____/____/____
(day) (mon) (year)

ADDRESS: _____

LOT & CONC. #: _____ **FIRE #:** _____ **MUNICIPALITY:** _____

CITY: _____ **POSTAL CODE:** _____

HOME PHONE: (____) _____ **PREFERRED EMAIL:** _____

(Checked on a regular basis)

PARENT INFORMATION

Father's Name _____ **Mother's Name** _____
Telephone (Home) _____ **Telephone (Home)** _____
(Cell) _____ **(Cell)** _____
Additional Email _____ **Additional Email** _____
(Communication with team is primarily by e-mail. Please provide only e-mail accounts that are checked on a regular basis.)

I wish to volunteer my services as: *(requires Certification)*
 Coach _____ Assistant Coach _____ Trainer _____
 Trainer _____ Manager _____

DECLARATION

By signing this registration form, the player agrees to abide by the rules and regulations of Grey Highlands Shooting Stars Girls Hockey Association, its governing bodies and any affiliated leagues and/or tournaments.

Player's Signature _____ **Date** _____

INDEMNITY AND AUTHORIZATION

I hereby release Grey Highlands Shooting Stars Hockey, all Coaches, Instructors and Officers from all claims of damages resulting from any accident which may arise from participation of the registrant during any part of my child's participation in such activities or by reason of the provision/administration of medical care to her. I further consent to allow my child's first name, last name, and jersey number to be displayed in the hockey program, local newspapers and other publications as required throughout the season. No other personal information will be released.

Signature _____ **Date** _____
(Signature of parent or guardian is required)

Each family is required to participate in The Shooting Stars Cash Calendar Ticket Fundraiser. Each player receives \$125.00 worth of tickets to sell. A separate cheque in the amount of \$125 is required to meet lottery license requirements, post dated for October 31, 2016.

Office Use Only – Registration Confirmation Date Received _____ Total Amount Received \$ _____

Payment Options: Can be paid in full at registration or paid in two installments. Two cheques at registration (first to be cashed June 30th) remainder cashed Aug 31.

New to Stars Organization	\$400	
Standard Registration Fee:	\$550	Cash _____
Early Reg Disc (before June 30, 2016)	-50	
Payment June 30, 2016	\$500 / \$250x2	
Cash Calendar Cheque (Oct 31)	\$125	Cheq. #s _____
Due Aug. 31, 2016 (Early Reg)	\$250	
Due Aug. 31, 2016 (Std Reg)	\$550 / \$125	Processed by: _____