



2018-2019 Season

PLAYER INFORMATION

Level: _____

NAME: _____ BIRTHDATE: ____/____/____
(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.)

<p><i>I wish to volunteer my services as:</i> <small>(requires Certification)</small></p> Coach _____ Assistant Coach _____ Trainer _____ Manager _____	<p><i>I wish to volunteer my services as:</i> <small>(requires Certification)</small></p> Coach _____ Assistant Coach _____ Trainer _____ Manager _____
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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, 2018.

Payment Options: Can be paid in full at registration or paid in two installments. Two cheques at registration dated June 30th and Aug 31st. Please see back for more information.

Registration Confirmation	Date Received _____	Total Amount Received	\$ _____
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Standard Registration Fee:	\$550	Cash _____
Payment June 30, 2018	\$550 / \$275x2	
Cash Calendar Cheque (Oct 31)	\$125	Cheq. #s _____
e-Transfer is now available!		
After Aug. 31, 2018 (Late fee of \$50)	\$600	Processed by: _____

Important Registration Information

Please check off and initial at the bottom to ensure you agree to the below information:

- No Player will be permitted on the ice until full registration is received (including late fee and cash calendar if applicable) Full registration includes both pages of the registration form signed and full payment.
- If two cheques received for registration, the first is cashed on June 30, 2018 and the second is cashed August 31, 2018. Cash calendar cheques are cashed October 31, 2018
- Late fee of \$50 will be applied to any registrations that are not received in full by August 31, 2018.

I agree to the terms stated above:

Parent Signature:

Date:
