

BRUCE PENINSULA MINOR HOCKEY ASSOCIATION 2018-2019 REGISTRATION FORM

Family name:					
Mother's Name:	Name:	Email:			
Father's Name:	Name:	Email:			
Address & Phone:	R.R#:	Street/911#:			
	Town:	Postal Code:	Primary Phone#:		

Player's Name	Position	Rep Tryout	Division	Birth Date	Fee	Amount
			Initiation 2014		\$100	
			Initiation 2012/13		\$200	
			Tyke (7) 2011		\$300	
			Novice (8) 2010		\$470	
			Atom (9-10) 2008/09		\$470	
			Peewee (11-12) 2006/07		\$500	
			Bantam (13-14) 2004/05		\$500	
			Midget(15-17) 2001/02/03		\$500	

Late Registration Fee - After August 15th- Add \$150 per player	\$150 x
Non-resident Fee(per Child) - does not reside in North Bruce, South Bruce or Georgian Bluffs	\$75 x
Multi-Player Discount- \$25 discount for each child after 2nd	\$25 x

2018-2019 VOLUNTEER OBLIGATIONS - Each Family will be required to fulfill 10 volunteer hours.
BUY-OUT OF VOLUNTEERING PER FAMILY \$400 DATED 09/01
VOLUNTEERS -post dated cheques are required in the amountof the buyout \$400 dated 09/01

For Admin purposes only	Special Notes:
Cheque / Cash #	Cheque/Cash date
Cheque #	Cheque date
Buyout / Bond Cheque #	Cheque date

TRYOUTS? \$40/player - To be collected at 1st skate. Tryouts to begin on September 22nd in Lions Head.

FIRST TIME WITH MINOR HOCKEY?
 OMHA Copy of Birth Certificate attached RIS Parent Program Certificate Number _____

- Agreement:**
- As parents of a BPMHA player(s) when called upon to provide volunteer support we agree to assist our association and my child's team.
 - I hereby consent and agree that the afore mentioned minors may participate in Bruce Peninsula Minor Hockey programs.
 - I understand that BPMHA or their sponsors assume no responsibility for injury or accident, except those that may be covered by insurance, as a result of such participation in, or travelling to or from such participation.
 - I agree that all rules and regulations will be abided by, by both the participants and their parents/legal guardian and their families.
 - I understand my child's image and/or name may occasionally be provided to the local media and or published on the BPMHA affiliated websites. I do not give permission for videotaping or photography

The undersigned and all associated family members agree to abide by the terms noted above as well as the terms set by the BPMHA Rules of Operation, the constitution, and the BPMHA code of conduct governing the association under which applicants shall participate in Bruce Peninsula Minor Hockey Association.

_____ Signature

_____ Date

