



MELVILLE MINOR HOCKEY TRYOUTS FOR TIER 1

REGISTRATION FORM

Horizon Credit Union Centre

Participants Name _____ Position Played: _____

Minor Hockey Association Affiliated With _____

Age: _____ Date of Birth: _____ Medical #: _____

Parent/Guardians Name _____

Address _____

Email Address: _____

Home Phone: _____ Cell Phone: _____

Medical History / Allergies _____

Midget AA Female Tryouts (August 27, 2017) - \$50.00

Bantam AA Tryouts (September 9-10, 2017) - \$50.00

PeeWee AA Tryouts (September 15 & 17, 2017) - \$50.00

Midget AA Tryouts (September 23 - 24, 2017) - \$50.00

** Please have cheques made out to Melville Minor Hockey or MMHA **

WAIVER - Release of Liability:

I hereby release Melville Minor Hockey Association, instructors and staff from any possible claims, liabilities, obligations, or responsibilities and from any and all accidents or injuries, whether they be on the ice or off, hockey related or not, while my child participates in the program. I further certify as to my child's sound health of mind and body.

Signature of Parent / Guardian: _____ Date: _____

Any questions in regards to these tryouts can be directed to Tammy Stevenson, Chairman of Hockey (chairman@melvilleminorhockey.net) Please bring registration form to camp or email to Tammy in advance.

Registrants belonging to other associations MUST come with a release from their association in order to be allowed to participate in Melville's tryouts.

FOR OFFICE USE ONLY: PAID BY: CASH CHQ Release Required: Yes No Initials: _____