PENTICTON MINOR HOCKEY ASSOCIATION 2018-2019 Application for Membership

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Please Print PLAYER INFORMATION	PARENT/GUARDIAN						
PLAYER PLAYER	FATHER		MOTHER				
LAST NAME	LAST NAME		LAST NAME				
FIRST NAME	FIRST NAME		FIRST NAME				
DATE OF DIDTH (M. d. D. W.)			HOME & CELL DHONE NUMBER				
DATE OF BIRTH (Month – Day- Year) New registrants must supply copy of birth certificate	HOME & CELL PHONE NUMBER		HOME & CELL PHONE NUMBER				
E-MAIL ADDRESS: *NOTE* Must be included to receive Hockey Canada Registry tax receipt via email.							
PREVIOUS ASSOCIATION	TEAM	NUMBER OF	PREFERRED BOO	UTION	SHOT		
If not Penticton MHA, refer to "Registration & General	YEARS		PREFERRED POS FORWARD	I (CIRCLE)			
Info". Scroll down to "transfer players" as further documentation must be provided with reg form. Items		PLAYING	DEFENCE		L R		
will be returned if documentation items are missing.			GOAL				
OFFICE USE ONLY							
Check if new address FEMALES ONLY: Female Team Mixed Team Dual Roster add \$250							
GENDER (CIRCLE) Male Female							
HOME PHONE NUMBER	ADDRESS SAME AS PLAYER OR:		ADDRESS SAME AS PLAYER OR:				
MAILING ADDRESS	ADDRESS		ADDRESS				
RESIDENTIAL ADDRESS	CITY/TOWN		CITY/TOWN				
CITY/TOWN	POSTAL CODE		POSTAL CODE				
	TOSTAL CODE		TOSTAL CODE				
POSTAL CODE	(WORK) PHONE NUMBER		(WORK) PHONE NUMBER				
SIGNATURE AND WAIVER: We herby acknowledge the authority of Hockey Canada, BCAHA, Associations. Upon registration of child, parents &/or legal guardi. RELEASE:							
In consideration of this application to play under the auspices of Penticton Minor Hockey Association, I hereby for myself, heirs, executors, administrators and assigns, remise, release and							
forever discharge Hockey Canada, BCAHA, OMAHA, Penticton Minor Hockey Association its officers, or anyone acting on their behalf from any manner of litigation, damage, claims, or demands in law or equity which I may have or acquire by reason of person injury, loss or damage to property, which may occur during or by reason of participation in the activities of Penticton							
Minor Hockey Association. I/We grant PMHA permission to publish name/photo of players for advertising purpose and agree to receive electronic notices/advertisements. EQUIPMENT:							
IWe, at the end of the season covered by this registration, agree to reimburse the Penticton Minor Hockey Association for the replace.		Penticton Minor Hockey Asso	ociation in good condition and	should we fail to d	o so we agree to		
, , ,							
SIGNATURE:	DATE:						
Mandatory Parent RIS Check if one	or more parent/guard	ian has completed th	e Parent Respect In	Sport (RIS)			
Player Name: Received payment from: Date rec							
Basic Fee Atom (2008/2009), Pee Wee (2006/2007), Bantam (2004/2005), Midget (2001/2002/2003)							
Basic Fee Initiation (born 2012/2013) & Novice (born 2010/2011)							
Basic Fee Mini Vees (born 2014)							
Female Dual Roster Fee Subject to approval by the Executive							
Add (Optional) Atom Dev, PeeWee, Bantam, Midget Rep Tryouts *Aug 27-30 & Sept 4-7 *Non-refundable \$150							
Add Late Fee Surcharge per family unit (siblings)— After June 30 th (First time registrants exempt) \$100							
Subtract Credit Vouchers (Pleasse attach) & KidSport Funding *Cash not accepted				\$			
Total Fee Paid PMHA Signature: MONEY CHEQUE PAYPAL				Total			

	MEDIC	AL INFORMATION			
PLAYERS NAME		BIRTHDATE (Month – Day – Year) & BC CARE CARD #			
PARENT/GUARDIAN	PHONE NUMBER	PARENT/GUARDIAN	PHONE NUMBER		
EMERGENCY CONTACT	PHONE NUMBER	ALTERNATE EMERGENCY CONTACT	PHONE NUMBER		
DOCTOR NAME		DENTIST NAME			
PLEASE INDICATE MEDICAL PROBLEM	IS THAT WOULD INTERFERE WITH PA	ARTICIPATION ON A HOCKEY TEAM (ALERGIES, C	ONCUSSIONS, Etc.)		
In the event of a medical emergency that he/she may start an examination		f information in this medical Information section ce.	n to an authorized medical professional so		
SIGNATURE:		DATE:			
SIGNATURE.		DATE.			
Are you, or anyone in your family,	navailable to volunteer as: Teane Criminal Record Check. Refer to Screening Policy" under Info/Gui	to the "FORMS' tab for online application Videlines.	ety Person Manager ? Volunteers are not permitted on ice/bench		
	FAIR PLAY CO	DE – PARENT / GUARDIAN			
• I will remember t • I will encourage a • I will teach my cl outcor • I will make my cl • I will never ridicu • I will remember t and th • I will never quest manne • I will support all • I will respect and I have read, understand, and agre Penticton Minor Hockey. I also ag X PARENT / GUA	y child to participate in hockey hat my child plays hockey for his my child to play by the rules and to hild that doing one's best is as imple of the game. In the game of the game of the game. In the or yell at my child for making a hat children learn by example. I we will the official's judgment or hone or as players. In the official's judgment or hone or as players. In the official of the volunte of the volunte of the to abide by, the principles of the ree to abide by the rules, regulated a RDIAN SIGNATURE	or her enjoyment, not mine. O resolve conflict without resorting to hostility ortant as winning so that my child will never by offering praise for competing fairly and har a mistake or loosing a game. O resolve conflict without resorting fairly and har a mistake or loosing a game. O resolve ill applaud good plays and performances by be cesty in public. I recognize officials are being conceal abuse from hockey games. O resolve their time to hockey for my child the FAIR PLAY CODE as set by the Canadations, and decisions, as set forth by Pentictor DATE	feel defeated by the rd. both my child's team developed in the same d. lian Hockey Association and adopted by		
PARENT / GUA	ARDIAN SIGNATURE	DATE			
	FAIR PL	AY CODE – PLAYER			
must sign this contract stating tha • I will play • I will play • I will com • I will resp • I will do r • I will rem are als • I will ackr • I will rem I have read, understand, and agre	t they will observe the principles of hockey because I want to, not because I want to important. In which is a sum of the important in the important. In which is a sum of the important in t	for all participants within the Penticton Minof the Fair Play Code before being allowed cause others or coaches want me to. spirit of the Game. hing-off can spoil the activity of everyone. In a that having fun, improving skills, making mances - those of my team and my opponent re there to help me. I will accept their decision the FAIR PLAY CODE as set by the Canadaules, regulations and decisions as set by the	d to participate in hockey. In griends doing my best this. In s and respect them. It is an Hockey Association and adopted by		
XDI AVEDS SIGN	NATURE (all players must sign)				
PLAYERS SIGI	NATUKE (all players must sign)	DATE			