

## Provost Minor Hockey Registration Form (2018-2019)

**Registration Night @ CPP on June 13, 2018 from 5-7:30pm, Spring AGM to follow at 7:30pm**

Alternately registrations can be mailed to Provost Minor Hockey c/o Gaylene Paulgaard @ Box 736, Provost, AB T0B 3S0

Registrations will be accepted starting June 11, 2018 and ending on June 30, 2018

**Registrations MUST Include (please note that incomplete registrations will not be accepted):**

#1 - Completed Registration Form & Payment (cheque, or post-dated cheques, made out to Provost Minor Hockey and dated between October 1 - December 1, 2018)

#2 - Caution Fee Form & 2 Cheques, 1 for Booth Caution Fee, made out to Provost Arena Booth & 1 for Fundraiser Caution Fee, made out to Provost Minor Hockey (both dated for October 1, 2018)

**\*NEW REGISTRANTS** - MUST register on registration night & bring Birth Certificate & Alberta Health Care Card

	Fee Before June 30, 2018	Fee After June 30, 2018
Initiation (2012 & Younger)	\$295.00	\$395.00
Novice (2010 & 2011)	\$315.00	\$415.00
Atom (2008 & 2009)	\$335.00	\$435.00
PeeWee (2006 & 2007)	\$410.00	\$510.00
Bantam (2004 & 2005)	\$430.00	\$530.00
Midget (2001/2002/2003)	\$450.00	\$550.00

CHILD 1 (First/Last Name) \_\_\_\_\_ DOB (mm/dd/year) \_\_\_\_\_ AMT \$ \_\_\_\_\_

CHILD 2 (First/Last Name) \_\_\_\_\_ DOB (mm/dd/year) \_\_\_\_\_ AMT \$ \_\_\_\_\_

CHILD 3 (First/Last Name) \_\_\_\_\_ DOB (mm/dd/year) \_\_\_\_\_ AMT \$ \_\_\_\_\_

CHILD 4 (First/Last Name) \_\_\_\_\_ DOB (mm/dd/year) \_\_\_\_\_ AMT \$ \_\_\_\_\_

Paid in Full (Dated for October 1, 2018) Cheque # \_\_\_\_\_ TOTAL \$ \_\_\_\_\_

Post-Dated Cheques (Dated no later than December 1, 2018)

Date \_\_\_\_\_ Cheque # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Date \_\_\_\_\_ Cheque # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Date \_\_\_\_\_ Cheque # \_\_\_\_\_ Amount \$ \_\_\_\_\_

Father's Name (First/Last): \_\_\_\_\_ Mother's Name (First/Last): \_\_\_\_\_

Address (P.O. Box, Town & Street or Legal Land Location):  
\_\_\_\_\_  
\_\_\_\_\_

Father's Cell: \_\_\_\_\_ Mother's Cell: \_\_\_\_\_

Primary Email: \_\_\_\_\_ Secondary Email (if needed): \_\_\_\_\_

Emergency Contact (First/Last Name & Phone): \_\_\_\_\_

**\*IMPORTANT\*** - Please indicate if any players on this registration are tentative for any reason.

Please Circle: YES / NO and indicate which players: \_\_\_\_\_

Exceptions to the above fees will be made for new families moving in to our community and wishing to register their children with Provost Minor Hockey.

I understand that my child will not be registered on a PMH team, nor will he/she be allowed to participate on the ice at any time until RESPECT IN SPORT CERTIFICATION is current and complete.

I, the undersigned certify the above information to be true and in consideration of the granting of this certificate to me with the privileges incident thereto, and by signing this certificate I have become subject to the rules, regulations and decisions of Hockey Canada, its Board of Directors, its Branches and/or divisions which may be restrictive in some areas such as movement from team to team, conduct etc. and I agree to abide by such rules, regulations and decisions of Hockey Canada, its Board of Directors, its Branches and/or divisions. Further, the information requested above is required by Hockey Canada to facilitate hockey programs on behalf of the registrant and Hockey Canada. Hockey Canada will treat this personal information with the utmost respect and in accordance with the Hockey Canada Privacy Policy at all times.

Parent Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_