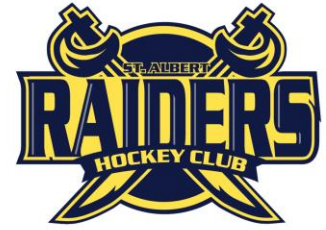




TEAM PERSONNEL ONLY

**ST. ALBERT MINOR HOCKEY ASSOCIATION/  
RAIDERS HOCKEY CLUB  
PERSONAL INFORMATION PROTECTION  
ACT NOTICE AND CONSENT**



\_\_\_\_\_  
TEAM PERSONNEL  
(print name)

\_\_\_\_\_  
BIRTH DATE

The Purpose of this notice and consent is to inform you of the use to which player information, pictures, images, game and other videography, and game information and game statistics will be made and to obtain your consent for such use.

1. The personnel information is collected and maintained so as to properly coordinate and operate the St. Albert Minor Hockey/ Raiders Hockey Club program and is also provided to Hockey Alberta and Hockey Canada or any league the coaches or managers team plays in, for registration, recording statistical information and insurance purposes.
2. Names, information, data, photos, images, game and other videography, and comments may also be used in team or league newsletters, annual reports, St. Albert Minor Hockey Association/Raiders Hockey Club and Hockey Alberta, reports, communications and correspondence and for web sites, radio, newspaper and other hockey or local publications.
3. Individual and team photos may be taken and displayed in the local newspaper and in local arenas and the offices of St. Albert Minor Hockey Association and in yearbooks and other reports and advertisements prepared by St. Albert Minor Hockey Association/Raiders Hockey Club.
4. Names, telephone, e-mail and other information may be used for the purposes of team, league and for St. Albert Minor Hockey Association/Raiders Hockey Club communication, educational and training purposes, communication to junior leagues, and transportation matters and services.
5. Names and images may be included on lists for the purposes of team placement and for tracking statistics by the team, leagues, St. Albert Minor Hockey Association/Raiders Hockey Club, and Hockey Alberta and such statistics may be displayed on their websites.
6. **This Consent shall remain in force for as long as you are a member of St. Albert Minor Hockey Association/Raiders Hockey Club and need only be signed once.**

I hereby consent to the above:

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian (print name)