



# HOCKEY REGINA INC.

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| FOR HRI USE ONLY |       |       |         |
|------------------|-------|-------|---------|
| GRID             | CASH  | DEBIT | VISA/MC |
| _____            | _____ | _____ | _____   |
| ZONE             | BINGO | CHQ   | FUNDING |
| _____            | _____ | _____ | _____   |

## 2024/2025 PLAYER REGISTRATION FORM

A **\$25.00 Transfer Fee** will be applied to **ALL** requests for registration changes after August 15, 2024.  
 The Board of Directors reserves the right to place late registrations in the B/C Division or reject transfer requests to AA/A.  
**NOTE:** All third-party funding (Kidsport, First Nations etc.) must be in place by Oct. 15, 2024 so please apply ASAP.

### Registering For:

- |                                    |                                         |                                         |                                       |                                       |
|------------------------------------|-----------------------------------------|-----------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> U7        | <input type="checkbox"/> U11A           | <input type="checkbox"/> U13AA          | <input type="checkbox"/> U15AA        | <input type="checkbox"/> U18AA        |
| <input type="checkbox"/> U7 Female | <input type="checkbox"/> U11B/C         | <input type="checkbox"/> U13A           | <input type="checkbox"/> U15A         | <input type="checkbox"/> U16AA        |
|                                    |                                         | <input type="checkbox"/> U13B/C         | <input type="checkbox"/> U15B         | <input type="checkbox"/> U18A         |
| <input type="checkbox"/> U9        | <input type="checkbox"/> U11 A Female   | <input type="checkbox"/> U13AA Female   | <input type="checkbox"/> U15AA Female | <input type="checkbox"/> U18B         |
| <input type="checkbox"/> U9 Female | <input type="checkbox"/> U11 B/C Female | <input type="checkbox"/> U13 B/C Female | <input type="checkbox"/> U15A Female  | <input type="checkbox"/> U18AA Female |
|                                    |                                         |                                         |                                       | <input type="checkbox"/> U18A Female  |

| Player Information: Please print clearly                                                                                                                                                                                      |                       |              |                       |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|--------------|-----------------------|--|
| Last Name:                                                                                                                                                                                                                    |                       |              | First Name:           |  |
| Birthdate:                                                                                                                                                                                                                    | MM / DD / YYYY<br>/ / | Gender: Male | Female                |  |
| Parent Respect in Sport #                                                                                                                                                                                                     |                       |              |                       |  |
| Address:                                                                                                                                                                                                                      |                       |              |                       |  |
| City:                                                                                                                                                                                                                         |                       | Postal Code: | Phone # ( )           |  |
| School for 2024/2025:                                                                                                                                                                                                         |                       |              | Last team played for: |  |
| Position to be evaluated for (choose only <u>ONE</u> ): <input type="checkbox"/> Forward <input type="checkbox"/> Defence <input type="checkbox"/> Goal (U11-U18 <u>only</u> ) <input type="checkbox"/> Skater (U7 & U9 only) |                       |              |                       |  |

| If addresses for parents are different, the player's address should be listed as where the player usually resides (4 out of 7 days). |               |              |                                                           |  |
|--------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------|-----------------------------------------------------------|--|
| Mother's Information: (Please complete all fields)                                                                                   |               |              | Father's Information: (Please complete all fields)        |  |
| Name:                                                                                                                                |               |              | Name:                                                     |  |
| Address: Check if <input type="checkbox"/> same as player                                                                            |               |              | Address: Check if <input type="checkbox"/> same as player |  |
| City:                                                                                                                                | Postal Code:  | City:        | Postal Code:                                              |  |
| Cell Ph: ( )                                                                                                                         | Other Ph: ( ) | Cell Ph: ( ) | Other Ph: ( )                                             |  |
| Email:                                                                                                                               |               |              | Email:                                                    |  |

### Parental/Guardian Conduct Agreement – At least one **MUST** sign this form

The parent/guardian of the above-mentioned player hereby consent to his/her participation in the Hockey Regina Inc. (HRI) minor hockey system. I do hereby release HRI and its officers from all liability in respect to any injury sustained by my son/daughter while playing hockey on any sheet of ice under the jurisdiction of HRI. I further agree to accept financial responsibility for any equipment supplied to my son/daughter by HRI that is lost or damaged while in his/her custody and to return such equipment clean and in good repair to Hockey Regina Inc. The parent/guardian and players further agree to be bound by the terms and conditions of HRI Bylaws, Rules, Regulations, and Parental Conduct Agreement (as shown on reverse) and to adhere thereto. Registering the above-mentioned player provides Hockey Regina the ability to share name, birth date, address, postal code, phone number and hockey associated information with other hockey and sports organizations at the discretion of Hockey Regina Inc.

\_\_\_\_\_  
Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Guardian Signature

\_\_\_\_\_  
Date

# Hockey Regina Parental/Guardian Conduct Agreement

2024-2025 Season

The Parental/Guardian Conduct Agreement is designed to help parents/guardians understand their role with their son's/daughter's participation in hockey.

The Player Registration Form must be signed by the parent(s) or guardian(s) acknowledging concurrence of the Parental/Guardian Conduct Agreement before their child is allowed to play hockey in the Hockey Regina system. **If the document has not been signed the player will NOT be registered.**

Parental/Guardian Conduct:

- I will not force my child to participate in hockey.
- I will remember that my child plays hockey for his or her enjoyment, not mine.
- I will encourage my child to play by the rules and to resolve conflict without resorting to hostility or violence.
- I will teach my child that doing one's best is as important as winning so that my child will never feel defeated by the outcome of the game.
- I will make my child feel like a winner every time by offering praise for competing fairly and hard.
- I will not ridicule or yell in a derogatory fashion at any player on either team, at game officials, team officials or any parent.
- I will remember that children learn by example. I will applaud good plays by both my child's team and their opponents.
- I will never question the game official's judgment or honesty in public or in front of my child.
- I will remember that officials are developing their skills like the players they are officiating.
- I will support Hockey Regina's efforts to remove verbal and physical abuse from hockey games.
- I will respect and show appreciation for the efforts of coaching staff and team officials who volunteer their time for hockey for my child.
- I will act responsibly towards hockey facilities and with those involved in the game – players, coaches, officials, spectators, and facilities staff.
- I will abide by my team's communications rules between coaches and parent's (i.e. through the parent liaison).
- I will observe a 24-hour waiting period before contacting coaches, team, or league officials after any incident.
- I will be responsible for my guests at my child's hockey games, encouraging them to respect and abide by these same rules.

I understand that Hockey Regina will apply restrictions of privilege if I do not adhere to the Parental/Guardian Conduct Agreement and Hockey Regina Rules & Regulations. These restrictions will include spectator privileges to player suspension based on frequency and severity of incidents.

Team's coaches/managers are responsible to notify the Division Director immediately of any parental/guardian conduct offenses.

## Hockey Regina "Fair Play for All"

**BINGO:** Do you wish to work bingos? Please check one. YES  NO

## **Why do Hockey Canada and the Member Partners collect demographic information?**

The collection of self-identification data is central to equity, diversity, and inclusion efforts. Hockey Canada and the Member Branches are collecting this data to increase our ability to enhance programs, while recognizing and removing barriers. The demographic data being collected through the HCR platform is consistent with how the Government of Canada solicits this information including the options you see of race/ethnicity, language and Indigenous Peoples (all of which provide "Prefer not to say" as an option). There are many factors as to why and how this data is collected: please refer to this Government of Canada website for more information: [https://www.ic.gc.ca/eic/site/063.nsf/eng/h\\_97737.html#1](https://www.ic.gc.ca/eic/site/063.nsf/eng/h_97737.html#1).

## **Gender Identity**

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Hockey Canada and the Member Branches approved the Gender Expression & Identity Policy to become effective for the 2023-2024 Season, which includes offering more inclusive registration options.

## **Birth Country**

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As a member of the International Ice Hockey Federation (IIHF), Hockey Canada abides by the IIHF International Transfer Regulations, which may require individuals to obtain a transfer from their country of birth, or most recent country they transferred to, before being eligible to play in Canada. Please contact your local Minor Hockey Association for more information.

## **Race & Ethnicity**

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Ethnicity refers to the ethnic or cultural origins of a person's ancestors (Statistics Canada). Race is used to classify people into groups based principally on physical traits such as skin colour (Ontario Government, 2022). If you identify with more than one race/ethnicity, please select 'multiple races/ethnicities'. If you do not identify with any races/ethnicities list, please select, 'prefer to self-describe'. In both cases a textbox will appear to allow write-in responses.

**Please answer ALL Hockey Canada and Hockey Saskatchewan questions on the following pages.**

# Hockey Canada Questions and Agreements

This data is required by Hockey Canada and Hockey Saskatchewan and is being collected on their behalf by Hockey Regina Inc. (HRI)

**GENDER IDENTITY** – Please select one of the following:

- Boy/Man     Girl/Woman     Prefer not to say     Non-binary  
 Not captured in these options

**ETHNICITY** – Please select one of the following:

- Black                      Caucasian                      Chinese                      Filipino  
Indigenous                      Japanese                      Korean                      West Asian, North African or Arab  
Latin American                      South Asian                      Southeast Asian                      South Asian / East Indian  
Multiple Ethnicities                      Other                      Prefer not to say

**CITIZENSHIP** – Please choose one:  Canada or  Other (please list country) \_\_\_\_\_

**DUAL CITIZENSHIP** (if applicable) – \_\_\_\_\_

**BIRTH COUNTRY** – \_\_\_\_\_ or  to be confirmed

**Do you identify as part of an indigenous group?**                      Yes                       No

If YES, then please choose one:

- First Nations                       Metis  
 North American Indian / First Nations                       Inuit  
 Prefer not to say                       Prefer to self-describe  
 Other

### **Hockey Canada – Optional Use of Personal Information**

Hockey Canada does not sell, trade or otherwise share the personal or contact information we collect outside our Members and Associations. However, we may from time to time use this information for the purposes of offering you additional services, notifying you about promotions (including promotions offered by third parties or sponsors), and/or to conduct hockey specific research. Such communications may come from Hockey Canada, its members and/or Associations, or may come directly from the third parties/sponsors. This type of usage of your personal or contact information by Hockey Canada, its Members, its Associations and or third parties/sponsors is entirely at your discretion. Should you choose to allow this type of usage, please check the box below.

I agree  I disagree

### **Hockey Canada – Acknowledgement**

I certify the information provided to be true and in consideration of the granting of this registration to me with the privileges incident thereto, and by registering I have become subject to the rules, regulations and decisions of Hockey Canada, its Board of Directors, its Members and/or associations 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 Members and/or associations.

### **Hockey Canada Use of Registration Data**

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By filling this form, I consent to the processing by Hockey Canada of the personal information included in the form. I understand that Hockey Canada may also receive information from Members and/or associations related to my membership status and activities related to hockey programs. The information to be provided is required by Hockey Canada to facilitate hockey programs on behalf of the registrant and Hockey Canada and may be shared with service providers assisting Hockey Canada in doing so. Hockey Canada will treat this personal information with the utmost respect and in accordance with the [Hockey Canada Privacy Policy](https://www.hockeycanada.ca/en-ca/corporate/about/privacy-policy) (<https://www.hockeycanada.ca/en-ca/corporate/about/privacy-policy>) at all times, which should be consulted for more information.

Yes  No

### **Agreement**

Hockey Canada does not sell, trade or otherwise share the information we collect outside our Members and Associations. However, we may from time to time use this information for the purposes of offering additional services, promotions, including promotions offered by third parties, and/or hockey specific research. This type of usage of your personal information by Hockey Canada, its members and/or associations is entirely at your discretion. Should you choose to allow this type of usage please check the box below.

I agree  I disagree

## Waiver

I certify the information provided to be true and in consideration of the granting of this registration to me with the privileges incident thereto, and by registering I have become subject to the rules, regulations and decisions of Hockey Canada, its Board of Directors, its Members and/or associations 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 Members and/or associations. Further, the information to be provided 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.

I have read and accept the waiver  No

## Hockey Canada Special Programs - Medical Waiver

I authorize the Hockey Canada and/or Hockey Canada Foundation medical team to give first aid and treatment to my child for any minor injuries or illness they may experience while participating in the program. If my child sustains an injury or illness of a more serious nature while they are participating in the program, I authorize the medical team to administer, or to authorize other trained medical personnel to administer, such medical treatment as the medical team or such other trained medical personnel deems appropriate in the exercise of an absolute discretion, including, without limitation, X-ray examination, anesthesia, medical, dental, or surgical examination or treatment and general hospital care. This authorization is given in advance of any specific diagnosis, treatment or hospital care being required and is given to provide authority and power on the part of the medical team (or its designee) to provide any and all such examinations, treatment, or hospital care. I agree to indemnify and hold harmless from any expense or claims of any nature any entity which provides or causes to be provided examination, treatment, or hospital care pursuant to this authorization, except to the extent that such entity is negligent therein.

Yes  No

## Hockey Canada Special Programs - Use of Images Authorization

During my child's participation in the program, I acknowledge that they may be captured on video or photographed by or on behalf of Hockey Canada, the Hockey Canada Foundation, its provincial/territorial hockey associations, and the corporate sponsors affiliated with the program (each a "Permitted User"). I understand that such video(s) and photograph(s) may be used for purposes of creating editorial content, marketing campaigns, contests, promotional materials, video productions, television broadcasts, commercials, social media, and/or digital media. I hereby grant permission to each Permitted User to use any video or photograph of my child taken during the program at their discretion, and I waive (both on my behalf on behalf of my child) all personal rights, claims and objections arising from the use of such materials worldwide and in perpetuity by the Permitted Users.

Yes

No

**Hockey Canada Special Programs - Future Communication**

Hockey Canada and the Hockey Canada Foundation may contact me in future years to ask me questions about my child's involvement in hockey and to request my consent to share my child's story.

Yes

No

**Hockey Saskatchewan Waiver**

Hockey Saskatchewan does not sell, trade or otherwise share the information we collect outside our Associations. However, we may from time to time use this information for the purpose of offering additional services, promotions, including promotions offered by third parties, and/or hockey specific research. This type of usage of your personal information by Hockey Saskatchewan and/or associations is entirely at your discretion. Should you choose to allow this type of usage please check the box below.

I agree

I disagree