



## MCN Sports Advising and Skills & Pembina Pirates Minor Hockey

### Registration Form – Camp Options: Check all that apply

Pre-season Conditioning Camp \$55.00 <input type="checkbox"/> September 27, 28, 29, 2019	MCN Jersey \$20.00 <input type="checkbox"/>
<b>OPTION 1 (2<sup>ND</sup> YEAR Pee wee/Bantam/Midget Players)</b> <ul style="list-style-type: none"> <li>Camp 1 Checking Clinic <b>September 22, 2019</b></li> <li>Camp 2 Skating (Power skating edges etc.) <b>October 20, 2019</b></li> <li>Camp 3 Precision &amp; Puck Control <b>November 17, 2019</b></li> </ul>	<b>OPTION 2 (Novice/Atom/Pee wee 1<sup>st</sup> year)</b> <ul style="list-style-type: none"> <li>Camp 1 Game Positioning, Passing <b>September 20, 2019</b></li> <li>Camp 2 Skating (Power skating edges etc.) <b>October 20, 2019</b></li> <li>Camp 3 Puck handling, Shooting <b>November 17, 2019</b></li> </ul>
Total Cost for all 3 camps \$225.00 <input type="checkbox"/>	Total Cost for all 3 Camps \$225.00 <input type="checkbox"/>

Grand Total: \$ \_\_\_\_\_

SKATER'S NAME: \_\_\_\_\_

SKATER'S MINOR HOCKEY ASSOCIATION: \_\_\_\_\_

DATE OF BIRTH: D \_\_\_\_\_ /M \_\_\_\_\_ /Y \_\_\_\_\_ CIRCLE: MALE/FEMALE

PARENT/GUARDIAN NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

TOWN/CITY/PROVINCE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE NUMBER & NAME: \_\_\_\_\_

ALTERNATE PHONE NUMBER & NAME: \_\_\_\_\_

ALLERGIES/PRE-EXISTING MEDICAL CONDITIONS: \_\_\_\_\_

I, THE PARENT/GUARDIAN OF THE ABOVE NAMED CHILD, HEREBY GIVE MY APPROVAL FOR HIS/HER PARTICIPATION IN THE ABOVE NAMED ACTIVITY DURING THE CURRENT SEASON (2019-2020). I ASSUME ALL RISKS INCIDENTAL TO THE CONDUCT OF THE ACTIVITY AND TRANSPORTATION TO AND FROM THE ACTIVITIES. I DO HEREBY RELEASE, ABSOLVE AND HOLD HARMLESS THE ORGANIZERS OF THE ACTIVITY, SPONSORS, SUPERVISORS, AND ANYONE CONNECTED WITH THE PROGRAM IN CASE OF INJURY TO THE ABOVE NAMED CHILD, I HEREBY WAIVE ALL CLAIMS AGAINST THE ORGANIZERS AND SUPERVISORS OF THE ACTIVITY.

I grant permission to MCN Sports and Matt Gorman to publish any and all publications for any lawful purpose including, without limitation, publicity, illustration, advertising, and Web content.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENTS.

Parent/Guardian: Print and Sign:

\_\_\_\_\_ Date: \_\_\_\_\_

**Full payment must be received at time of registration to guarantee spot.** Cancellation/Refund policy: None

We reserve the right to cancel any sessions if minimum registration numbers are not met. A fee of \$25.00 will be charged for any NSF charges. Cheques payable to Pembina Minor Hockey.