

Southeast Hockey Association
PO BOX , 32152 Millwoods Edmonton, AB T6K 4C2
Phone: (780) 461-6673 Fax: (780) 465-6904
PLAYER APPLICATION TO REGISTER FORM

Player's Name: _____	
Player's Address: _____	
City: _____	Postal Code: _____
Home Phone: _____	Cell Phone: _____

Season: 2019-2020 **Division:**
Bantam, Midget
RIS # _____
Community League _____
Card # _____
Date of Birth: (Y/M/D) _____
Birth Certificate # _____

AB Health Insurance #: _____	Gender: M <input type="checkbox"/> F <input type="checkbox"/>
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Team Information			
Position: _____	Shoots: R <input type="checkbox"/> L <input type="checkbox"/> A <input type="checkbox"/>	Height: _____	Weight: _____
Previous Team: _____			

Mother/Guardian Information			
Name: _____		Relation: _____	
Address: _____		P.C.	
Home Phone: _____	Work Phone: _____	Cell Phone: _____	
E-mail: _____			

Father/Guardian Information			
Name: _____		Relation: _____	
Address: _____		P.C.	
Home Phone: _____	Work Phone: _____	Cell Phone: _____	
E-mail: _____			

Emergency Contact Information - If parent is not available, please contact the following	
Name: _____	Phone (Home): _____
Phone (Cell) if applicable: _____	

DISCLAIMER

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 the certificate I have become subject to the rules, regulations, and decisions of Hockey Canada, it's 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.

Edmonton Minor Hockey Association does not sell, trade or otherwise share the information we collect outside our Branches 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 Branches and/or Associations is entirely at your discretion, should you choose to allow this type of usage, please check the box here:

Parent Name (print) _____ Player Name (print) _____

Signature _____ Signature _____

Date _____ Date _____

-----FOR REGISTRAR'S USE ONLY-----

Fee	Amount	Payment Type	Amount	Date
Registration Fee				
Total				