# FOIP CONSENT FORM FOR POSTING PERSONAL INFORMATION TO THE SLMHA WEBSITE AND RELEASE OF PERSONAL INFORMATION

Player's Name: _____

The purpose of this notice and consent is to inform you of the use to which player information, pictures and game information (statistics) will be made and to obtain your consent for such use.

1. The player information is collected and maintained so as to properly coordinate and operate the Smoky Lake Minor Hockey program and is also provided to Hockey Alberta, Hockey Canada and any league the player's team plays in, for registration, recording statistical information and insurance purposes.

2. Player's names, information, data, photos and comments may also be used in team or league newsletters, annual reports, Smoky Lake Minor Hockey Association, Hockey Alberta websites, Hockey Canada websites, radio, newspaper and other hockey or local publications.

3. Individual and team photos may be taken and displayed in the local newspaper, local arenas, other reports and advertisements prepared by Smoky Lake Minor Hockey Association.

4. Player's names and parents/guardian's telephone, e-mail and other information may be used for the purposes of team, league and for Smoky Lake Minor Hockey Association communication matters and services. Contact information will not be used for third party solicitation.

5. Player's names may be included on lists for the purpose of team placement and for tracking player statistics by the team, league, Smoky Lake Minor Hockey Association, Hockey Alberta, and such statistics may be displayed on their websites.

6. U15 & U18 player's name, and parent's/guardian's name, telephone, e-mail and other information may be forwarded to other registered leagues/associations under Hockey Alberta that request the information for the purposes of invites to camps.

7. This consent shall remain in force for as long as the Player is a member of Smoky Lake Minor Hockey Association and need only be signed once.

I hereby consent to the above:


Signature of Parent/Guardian Date:_____


Parent/Guardian (print name): _____