GVMHA REGISTRATION 2020-2021 for Existing Members

PARENTS:	You will be a	asked to volunteer for o	ne of the ma	any of the positions b	pelow on your Team	<mark>ı. This is a Volun</mark> ı	teer driven Assoc.	
Coach/Assistant Coach				Team Manager				
Treasurer				Tournament Director				
Division Manager				Tournament Committee Volunteer				
E-Scoresheet / Timekeepers				Dressing Room Attendant				
Team Media Person				Referee Player / Parent				
PLAYER INFORMATION - PLEASE PRINT								
LAST NAME				FIRST NAME			INITIAL	
STREET ADDRE	SS			CITY	POSTAL CODE			
BIRTH DATE (Ye	ar/Month/Day)	PHONE NUMBER		BC CARE CARD (10 DIGIT #)	GENDER (CIRCLE)			
							F* M	
*Female Pla	•	n. All girls toom	Mixad	PLAYER POSITION - REP PLAYERS MUST CHOOSE 1 POSITION (F-D-G)			SHOT (CIRCLE)	
Would you prefer to play on: All girls team Mixed L R								
*FEMALES	: Team stru	cture will depend on th	e number of	females registered a	nd their preference	of an all girls or	mixed team.	
Female teams planned for the 2020-21 season are PeeWee Rec, PeeWee A Rep and Bantam A Rep - please choose above								
REGISTR	ATION FE	ES						
AGE	BIRTH YEAR	DIVISION		HOUSE REP (includes \$150 nor		non-refundable tryout fee)		
AGL		DIVISION		PAID BY JULY 31st ** PAID BY JUI		JULY 31st **		
5 - 6	14-15	U7		\$360.00 N/A			I/A	
7 - 8	12-13	U9		\$410.00		N/A		
9 - 10	10-11	U11		\$510.00 \$660.00				
11 - 12	08-09	U13		\$510.00 \$660.00				
13 - 14		U15		φο το.οο				
	06-07			\$\text{\tin}\text{\ti}\xi}\\ \text{\texi}\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\texi}\text{\text{\text{\text{\text{\text{\text{\texi}\tint{\text{\texi}\t				
	15-16-17 03-04-05 U18			\$550.00	\$550.00 \$700.00			
** After July 31st you may be put on a wait list **								
PAYMENT MADE BY: UISA/MC Cheque Money Order NAME:								
VISA/MC#				Expiry CVV# \$			¢	
PARENT/GUARDIAN INFORMATION - PLEASE PRINT								
FATHERS <u>LAST</u> NAME				FIRST NAME INITIAL				
PHONE NUMBER 1 CELL NO.				EMAIL ADDRESS FOR GVMHA COMMUNICATION PURPOSES (1 email per player)				
MOTHERS <u>LAST</u> NAME				FIRST NAME INITIAL				
PHONE NUMBER 1		CELL NO.		EMAIL ADDRESS				
SIGNATURE AND WAIVER: We hereby acknowledge the authority of Hockey Canada, BC Hockey, OMAHA and GVMHA and agree to carry out and abide by the Constitution, By-Laws, rules and regulations of those Associations. I give permission to GVMHA and my team to use my photograph in social media and websites that pertain to GVMHA activities.								
RELEASE: In consideration of this application to play under the auspices of GVMHA, I do hereby for myself, heirs, executors, administrators and assigns, remise, release and forever discharge Hockey Canada, BC Hockey, OMAHA, GVMHA, its officers, or anyone acting on their behalf from all manner of litigation, damage, claims, or demands in law or equity which I may have or acquire by reason of personal injury, loss or damage to property, which may occur during or by reason of participation in the activities of GVMHA.								
EQUIPMENT: We, at the end of each season covered by this registration, agree to return all equipment provided by GVMHA in good condition and should we fail to do so we agree to reimburse the GVMHA for the replacement of same.								
SIGNATURE OF PARENT/GUARDIAN								