

G.G.S.H.A REGISTRATION FORM 2019

PLAYERS NAME: _____ **Male** **Female**

ADDRESS: _____

CITY: _____ **ZIP:** _____

PHONE: _____ **CELL PHONE:** _____

BIRTHDATE: _____ **AGE AS OF JAN 1, 2019:** _____

EMAIL: _____ Players must be 19 years old or younger as of Jan 1, 2019

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YEARS OF HOCKEY EXPERIENCE: _____ **STREET:** _____ **ICE:** _____

POSITIONS WILLING TO PLAY (CHECK ALL THAT APPLY): FORWARD DEFENSE GOALIE

D I V I S I O N S					
<input type="checkbox"/>	CHIPMUNKS	(AGES 4, 5, 6)	\$85	BEAVERS	(AGES 10, 11, 12) \$110
<input type="checkbox"/>	PENGUINS	(AGES 7, 8, 9)	\$110	<input type="checkbox"/>	CADETS (AGES 13, 14, 15) \$110
	<input type="checkbox"/>	FRESHMAN	(AGES 16, 17, 18, 19)	\$110	

PARENT/GUARDIAN HOLD HARMLESS RELEASE

I, the parent/guardian of the above named candidate in the **Greater Gardner Street Hockey League**, hereby give approval to his/her participation in all league activities during the current season. I assume all risks and hazards incidental to such participation, including transportation to and from activities, and I hereby waive, release, absolve, and indemnify and agree to hold harmless the sponsors, organizers, coaches, board members and participants for claims arising out of injury to my child. I also understand that the league has requirements concerning equipment for face, eye and body protection.

Signature: _____ Printed Name: _____

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PARENT/GUARDIAN WOULD LIKE TO HELP AS: **HEAD COACH** **ASST COACH (Check one)**

IF YES, NAME (PLEASE PRINT): _____ **Yrs experience** _____

PHONE: _____ **EMAIL:** _____

NOTE: All Coaches MUST complete a CORI form – NO EXCEPTIONS CORI form: _____

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INTERESTED IN SPONSORING A TEAM? YES NO (Circle One) ONE TEAM \$175___ TWO TEAMS \$300 _____

YOUR NAME: _____ EMAIL: _____

PHONE: _____ ALTERNATE PHONE: _____

TEAM NAME(S): _____

DIVISION(S): _____

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-- G.G.S.H.A. USE ONLY --

PAYMENT: CASH CHECK NO: _____ BANK: _____