



**WATERFORD DISTRICT MINOR HOCKEY ASSOCIATION
REGISTRATION 2018-2019**

Please print and complete this form and forward to:

**WDMHA c/o Registrar
P.O. Box 699
Waterford, ON
NOE 1Y0**

Payment MUST be included. (Cheques only/post-dated cheques accepted/DO NOT mail cash)

Players Name: _____

Date of Birth: _____ Age: _____

Division: _____

Parent/Guardian Name: _____

Player Address: _____

Phone Number: _____ Email Address: _____

Parent Cell Number (or Alternate): _____

Emergency Contact Info: _____

CHECK	Division	Fee (NOTE)	
		Early Bird	Full Price
<input type="checkbox"/>	Beginner, Initiation and Tyke (ages 3 to 7)	\$400	\$500
<input type="checkbox"/>	Novice to Juvenile (ages 8 to 20)	\$575	\$675

Please check and remit the appropriate fee above

NOTE: Early Bird Registration Deadline: July 31/2018

If registering after this date you will be required to pay Full Price.

Optional (Check if applicable):

X Discount for 3rd player (-\$95)

X Discount for 4th player (-\$95)

Please indicate that you give permission for the WDMHA to email the address above information or updates for this season (circle yes or no): YES / NO

As part of your registering with **Waterford District Minor Hockey Association**, please sign and return the attached waiver with your application.

WDMHA Waiver

1. I, the applicant, certify the information on the on-line registration form to be true and consent to the Player participating in the hockey program of the WATERFORD DISTRICT MINOR HOCKEY ASSOCIATION (hereafter will be noted as WDMHA). I further agree to abide by and be subject to the constitution, by-laws, regulations, rules, and decisions of the WDMHA, the MINOR HOCKEY ASSOCIATION OF WATERFORD and HOCKEY CANADA. I am aware that copies of these rules and regulations are available from the WDMHA upon request.
2. I, the applicant, understand that hockey is a vigorous and physically demanding game in which injuries may occur. I hereby apply for registration of the player in the programs of the WDMHA, agreeing to accept the reasonable risk inherent in the game of hockey including the risk of serious personal injury. The applicant, for himself, herself, themselves, their next of kin, executors, administrators assigns, hereby irrevocably releases the WDMHA, its officers, directors, coaches, assistant coaches, trainers, managers, referees, officials, servants, agents, and employees from all manner of claims or causes by actions in any way related to personal injury or property damage sustained by the registered player and/or the applicant in the course of participating in, viewing, or traveling to or from any of the games or programs sanctioned by the WDMHA. I agree to extend this Waiver to include off-ice activities conducted by the team. These activities include use of gymnasium facilities for dry-land training activities and recreational sports such as floor hockey. Other activities may include team parties and/or road hockey.
3. I, the applicant, agree to abide by the following conditions of membership as set out by WDMHA:
 1. The WDMHA reserves the right to refuse any person admission into the WDMHA. Further, WDMHA reserves the right to assign or transfer this membership without seeking further consent.
 2. The WDMHA adheres to the age classification system approved by Hockey Canada. The formations of the WDMHA teams are based on this classification together with the player selection system.
 3. New registrants must provide the WDMHA with a true copy of their birth certificate at the time of registration.
 4. Players will, at all times, on and off the ice, conduct themselves in a sportsmanlike manner, according to the WDMHA Code of Conduct. Infractions of the rules may result in the imposition of severe penalties, including suspension from further play.
 5. All sweaters and goalie equipment issued by the WDMHA are the property of the WDMHA.
 6. All players in the WDMHA must wear a CSA approved type helmet, which fastens under the chin, together with a CSA approved facemask. They must wear protective devices such as athletic supports with cups, shin guards, hockey gloves, neck/throat protectors, shoulder pads, elbow pads, hockey pants, mouth guard etc. In addition, goaltenders must wear an approved type of facemask, as well as an approved head and throat protector. Insurance is void if a player's helmet is removed while he/she is on the ice or on the bench.
 7. The responsibility for the transportation of players to and from the games or practices rests with the parents, under the direction of the team coach or manager.
4. I, the applicant, acknowledge that a parent or guardian of the Player registered with Waterford District Minor Hockey must complete the "Respect in Sport for Parents" education as a condition of the hockey player's participation with OMHA teams (effective Aug. 31st, 2014). Failure on my behalf to complete the mandatory program will affect my Player's eligibility to participate in any WDMHA activities.
5. I certify that I have read, understood, and declare my agreement with the foregoing declaration.

Signed: _____

Print name (Parent/Guardian)

Signature: _____