



**WATERFORD DISTRICT MINOR HOCKEY ASSOCIATION  
REGISTRATION 2019-2020**

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: \_\_\_\_\_

Please note: all "new" registrants must provide a copy of the players birth certificate with their application.

Division: \_\_\_\_\_

**Note: Players will be placed in their age appropriate division as part of the registration process. Player movement thereafter must follow the WDMHA player movement provisions.**

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 31/2019**

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

**Optional (Check if applicable):**

Discount for 3<sup>rd</sup> player (-\$95)

Discount for 4<sup>th</sup> player (-\$95)

As part of your registering with **Waterford District Minor Hockey Association**, please sign and return the attached waiver and consent for the collection and use of personal information with your application.

## Waterford District Minor Hockey Association (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 ONTARIO MINOR HOCKEY ASSOCIATION 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 Ontario Minor Hockey Association and/or Hockey Canada. The formations of the WDMHA teams are based on this classification together with the player selection system.
  3. New registrants must provide WDMHA with a 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: \_\_\_\_\_

**Waterford District Minor Hockey**  
**Consent for the collection and use of Personal Information**

The purpose of this notice and consent is to inform you of the collection and use of player information, pictures, video, game information and game statistics that will be made and to obtain your consent for such use. This consent seeks to ensure compliance with the *Personal Information Protection and Electronics Documents Act (PIPEDA)*.

The player information is collected and maintained so as to **properly coordinate and operate the Waterford District Minor Hockey Association (WDMHA) Program and such information is also provided to Southern Counties Minor Hockey Association (SCMHA), Ontario Minor Hockey Association (OMHA) and Hockey Canada (HC) or any league the player's team plays in;** for registration, recording player/team statistical information, recording game events, training/coaching exercises, and insurance purposes.

**Player's names, information, data, photos, videos and comments** may also be used in team or league newsletters, annual reports, WDMHA website, SCMHA website, OMHA website, radio, newspaper, and other hockey or local publications. Individual and team photos and videos may be taken and displayed in the local newspapers, in the local arena, website and for advertisements prepared by WDMHA. League games and/or team training events may be video taped and such recordings may be used in a restricted manner by the coaching/training staff for the purpose of training/developing the individual/team. This consent herein also provides consent to third party WDMHA approved trainers to utilize video capture systems in their training exercises. Such videos and extracted still images may be used and shared with those involved in the training exercise for the purpose of post-training review and/or shared within public advertising media (website, posters) for the purpose of advertising the training program.

**Player's names and parents/guardians telephone, e-mail, and other information may be used** for the purposes of the team, league and for WDMHA communication and transportation matters and services.

Player's names may be included on lists for the purposes of team placement and for tracking player statistics by the team, leagues, WDMHA, SCMHA, OMHA and Hockey Canada and such statistics may be displayed on their websites or affiliate websites.

Signed: \_\_\_\_\_  
Print name (Parent/Guardian)

Signature: \_\_\_\_\_