

CHATHAM MINOR HOCKEY ASSOCIATION

Organized in 1950 – C.H.A. Sanctioned

2009-2010 PLAYER REGISTRATION FORM

Mail to: CMHA, P.O. Box 485, Chatham, Ontario N7M 5K6

Phone (519) 351-2212

E-mail: info@chathamminorhockey.com



Player's Name: _____ Date of Birth: _____
First Last dd/mm/yy

Address: _____ Phone Number: 519 - _____
Street Address

Apt # _____ Male Female
City

Postal Code

Parent's Name: _____ Date of Birth: _____
First Last (First time player registration only) dd/mm/yy

Address: _____ Phone Number: 519 - _____
(If different than above) (If different than above)

City Postal Code Email Address*: _____
(*Mandatory as Income Tax Receipts will be emailed to this address)

Previous CMHA Experience: House League Travel Team None

New Player? Note that a copy of the player's birth certificate is MANDATORY prior to start of season

If new to the centre of Chatham, indicate where played before _____

Preferred Position (please circle) LW RW C RD LD Goalie Shoots L R

FEE: \$360.00 per player if paid before July 31, 2009

Late registration - after July 31, 2009 - fee is \$410.00

Midget/Juvenile fee: \$385.00 (keeping House League jersey)

Late registration for Midget/Juvenile is \$435.00.

Payment must accompany your application (cheque or money order payable to CMHA)

\$20.00 NSF fee applies

Credit Card (Visa or MasterCard) payment option **ONLY** available July 1 - July 31, '09
using our On Line Registration – link is available thru www.chathamminorhockey.com

Travel fees to be released August 2009

THE PARENT /GUARDIAN IN CONSIDERATION OF ACCEPTANCE OF THE FEES HEREIN BEFORE SET OUT, WARRANTS AND AGREES ON CHILD'S BEHALF:

- The Registrant is a resident within C.M.H.A. boundaries (boundary map is posted on our website).
- C.M.H.A. will not be responsible for all or any medical or dental fees of any kind, type or description arising from any cause whatsoever.
- C.M.H.A. will not be responsible for any lost or stolen articles.
- All Registrants will play for the team and in the division the Executive of C.M.H.A. and Director feel is in the best interest of the player and C.M.H.A. whether it is House League or Travel.
- Full face masks, throat protector, and mouthguards are mandatory at all age levels.
- All registrants covered by C.H.A. insurance.
- Parents are you interested in Coaching in our House League. YES NO
- What are your credentials? None Coach Level Intermediate or Above
- Is your child interested in participating in the Tri-County Hockey League(if offered) YES NO
- Does registrant have any known medical disabilities? YES NO

Explain: _____

- The information on this form will be used to verify residency in Chatham-Kent and will remain confidential

Signature of Parent/Guardian/Applicant (if over 18) _____ Date _____ Registration Officer _____

OFFIE USE: Payment method: personal cheque # _____ cash \$ _____ money order # _____