Georgian Shores MHA Registration Form

Signature of Parent/Guardian



Contact Inform	ation									
Player's Name										
Street Address/										
Fire # and Road Name										
City, Prov, Postal C										
Home Phone										
Birthday (dd/mm/yyyy)							New to OMHA/	OWHA H	ockey?	>
Parent Information										
Mother Name										
Mother Home Phone		Mother Cell Phone (opt)								
Mother E-Mail										
Father Name										
Father Home Phone	Father Cell Phone (opt)									
Father E-Mail										
	_				_	_	_	_		_
If paid on			stration Fee Registration			Lottery Program		Level Preference		
		paid on or before May 30, 2017	(Not	If paid after May 30, 2017 (Not Applicable for Ne		One-time fee per family		Please circle. Depending on registration, team levels will be decided by May 15		
(2012-2013)		\$225	\$225			\$150/family		N/A		
(2010-2011)		\$350	\$450			\$150/family		N/A		
(2009)		\$550		\$650		\$150/family		LL	or	REP
(2007-2008)		\$550		\$650		\$150/family		LL	or	REP
(2005-2006)		\$550		\$650		\$150/family		LL	or	REP
(2003-2004)		\$595		\$695		\$150/family		LL	or	REP
(2000-2002)		\$595		\$695		\$150/family		LL	or	REP
***All fo	ees mu	ıst be paid i	n full b	efore pla	yer is eli	gible to	play or step	on the	ice*	**
Balance may be pai	id by po	stdated cheques	s. ALL ch	neques mu	st be receive	ed at the ti	ime of registration	on.		
E-transfer payment										
· ·		. Lottery Program che				· ·		Comb 1		
May 1 (2 ch \$150 or Full Payment		\$150/family	June 1 or 15		July 1 or 15		Aug 1 or 1	\$ Sept 1		ept 1
Chq# Chq#		· · · · · · · · · · · · · · · · · · ·	Chg#		Chg#		Chq#		Chg#	
The 3 rd or 4 th etc. child registered in a family will be given a \$100 discount.										
	_		•	•		d for all no	w playors to bo	skov		
Cheques should be made payable to 'GSMHA'. Birth certificates are required for all new players to hockey. Lottery Program: you are not obligated to take tickets; to sell or to keep; however, paying \$150 is a requirement of registration.										
Registration can be dropped off at Gyles Sails & Marine, 4 King St., Thornbury, or given to Heather Ruffett or Heather Lindsay.										
Each family registered with GSMHA is required to complete approximately 5 volunteer service hours.										
I agree to fulfill team obligations i.e., gate duty, 50/50 draws, fundraising which are assigned during the year.										
Signature of Parent/			izo +ho :-	so of any	nhoto taka	<i>Date</i> n while n	articinatina :-	the aba	V0 PF	oaram
PHOTO RELEASE APPROVAL: I authorize the use of any photo taken while participating in the above program.										

Date