




# Howick Minor Hockey Registration Form 2015/2016 Season

<b>Parent / Guardian Information</b>		 Howick Optimist Club donates \$35 towards every registered player	
Mother's Name		Players address same as Mother's Y / N	
Street Name and (Fire) Number		Town	Postal code
Telephone (home)	Telephone (cell)	Email Address	
Father's Name		Players address same as Father's Y / N	
Street Name and (Fire) Number (same)		Town	Postal Code
Telephone (home)	Telephone (cell)	Email Address	

<b>Divisions - Registration Fees</b>	
Mite/Tyke(2012-2008)-\$250    Novice(2007)- \$325    Atom(2006-2005)- \$350    Peewee(2003-2004)- \$400 Bantam(2002-2001)- \$450    Midget(2000-1998)- \$450    Juvenile(1997-1995)- \$450	
Payment options 1) Registration in full – payable September 1, 2015 to Howick Athletic Association 2) Registration in two equal payments – postdated cheque September 1, 2015 and November 1, 2015 3) Family rate \$900.00 maximum registration in equal payments - postdated: September 1, 2015 and November 1, 2015	
<b>First year players only:</b> Birth certificate required, Mite/Tyke no registration fee, Novice and above half price	

<b>Player Information</b>				
Last Name	First Name	Date of birth DD/MM/YYYY	Division	Fee
Last Name	First Name	Date of birth DD/MM/YYYY	Division	Fee
Last Name	First Name	Date of birth DD/MM/YYYY	Division	Fee
Last Name	First Name	Date of birth DD/MM/YYYY	Division	Fee
A fundraising deposit cheque of \$150 per player (max. \$300 per family) required. Postdated January 31, 2016			Add \$50 late fee after June 15, 2015 <b>Total</b>	\$

The undersigned and all associated family members agree to abide by the terms set forth in the HAA code of conduct. I give permission to photograph and identify the players for publishing to newspaper, websites, or other media. The photos may also be used for future advertising by the HAA.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

<b>Office use only</b>					
New player <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Right of choice checked <input type="checkbox"/>	Payment option 1 2 3	Cash Cheque # <input type="checkbox"/> Amount _____ (max \$800 per family)	Tax receipt issued Yes <input type="checkbox"/> No <input type="checkbox"/>	Fund Raising cheque received Yes <input type="checkbox"/> No <input type="checkbox"/> (max \$300 per family)	HAA Initials