



Howick Minor Hockey Registration Form 2020/2021 Season

Parent / Guardian Information			Thank-you to the Howick Optimist Club for their long time support of Howick Minor Hockey.		
Mother's Name			Players address same as Mother's Y <input type="checkbox"/> N <input type="checkbox"/>		
Street Name and (Fire) Number		Town	Postal code		
Telephone (home)	Telephone (cell)	Email Address			
Father's Name			Players address same as Father's Y <input type="checkbox"/> N <input type="checkbox"/>		
Street Name and (Fire) Number		Town	Postal Code		
Telephone (home)	Telephone (cell)	Email Address			

Divisions - Registration Fees					
U5 Pre-school(2017-2016)- \$200 U7 Initiation(2015-2014)- \$250 U8 Minor Novice(2013)- \$250 U9 Novice(2012)- \$350 U11 Atom(2011-2010)- \$375 U13 Peewee(2009-2008)- \$425 U15 Bantam(2007-2006)- \$450 U18 Midget(2005-2003)- \$450					
Payment options 1) Registration in one payment – e-transfer or postdated cheque September 11, 2020 2) Registration in two equal payments – e-transfer or postdated cheque September 11, 2020 and November 1, 2020 3) Family rate \$1000 max registration in equal payments – e-transfer or postdated cheque September 11, 2020 and November 1, 2020					
First year players: U5, U7, U8 no registration fee, U9 and above half price A copy of new players birth certificate required					

Player Information				
Last Name	First Name	Date of birth <small>DD/MM/YYYY</small>	Division	Fee
Last Name	First Name	Date of birth <small>DD/MM/YYYY</small>	Division	Fee
Last Name	First Name	Date of birth <small>DD/MM/YYYY</small>	Division	Fee
A separate fundraising deposit cheque (or e-transfer) of \$150 per player required. Max \$300 per family. Postdated January 31, 2021				Fundraising
LATE REGISTRATION FEE: waived but important to register early, capped teams due to COVID			Registration Total	\$

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 above named players for publishing to newspaper, websites, or other media. The photos may also be used for future advertising by the Howick Athletic Association.

Parent/Guardian Signature

Date

Position for which you are interested in:

Head Coach Assistant Coach Trainer Manager Parent Rep TEAM: _____

Please indicate form of payment					
New player	Y / N	Payment option 1 2 3	e-transfer <input type="checkbox"/> message will be sent around Sep 11 & Nov 1 requesting transfer	Fundraising Deposit e-transfer <input type="checkbox"/> message will be sent Jan 31 requesting transfer	HAA Initials
Birth Certificate	Y / N		Cash <input type="checkbox"/>	Cheque <input type="checkbox"/> message will be sent Jan 31 requesting transfer	
Right of choice checked	Y / N		Cheque <input type="checkbox"/> Cheque #	Cheque <input type="checkbox"/> Cheque #	
			Amount _____ (max \$1000 per family)		