



Hockey Registration Form 2011-2012 Season

Registration Date and Time:

There will only be one walk-in registration time: Friday, April 8th from 6-7 pm., prior to the Annual Hockey Banquet, at the Zurich Arena in the auditorium. (BeanFest shifts will be assigned on this day also on a first come-first served basis.)

All registrations, with the exception of new families, received after April 8th will pay \$25.00 per player more and those received after June 1st will pay \$50/per player more. It is very important that we receive your registration on time. Why, you ask? It takes a lot of time and effort to organize teams, get coaches, trainers, managers and especially, book ice time. You will be charged the late fee if the complete registration (including post-dated cheques are not received before the deadlines. Registrant families that are new to hockey in Zurich are exempt from this late fee. Please attend the registration at the arena on Friday, April 8th from 6-7. If you cannot be at registration, you may give it to another family to bring or deliver in person after April 8th or prior to June 10th to:

Jamie Brand

71417 Bronson Line, (½ mile north of Dashwood- there is a mail box by our door, you may drop it in there-please let me know that you have left it. Registrations will not be accepted before April 8th at 6 pm)

Registrations will be considered LATE after April 8th and will be charged \$25 more and \$50 more after June 1st

E-mail: ajbrand@hay.net (519-237-3889)

We are pleased to offer hockey for all ages again this year. We are especially in need of Mite aged players (born in 2005) and novice aged players (2003 & 2004). Last year we were pleased to have 2 teams at the mite and peewee age level as well as girls peewee team and we would love to have to 2 teams at as many age levels as possible again this year.

Shinny hockey (1-1.5 hours a week-depending on the # of kids signed up) is being offered again. This will be available for those born from 1995-2002. Shinny hockey is a once a week program where kids can play hockey in a non-competitive and safe environment without traveling to other towns.

Please spread the word about our great organization. We offer prime ice times in a new arena with comparatively low registration fees. **Visit our website @ www.zurichminorhockey.ca**

Zurich Minor Athletic Association Hockey Registration Form 2011-2012 Season

1. Parent or Guardian Information:
Parents' or Guardians' names:
Mailing Address:
Town: Postal Code:
Telephone #: E-mail (please):
Do you have SMART SERVE? Yes No Server Name:
For new families or families who've moved since June '10 ONLY: Lot & Concession (rural) or House Number & Street name (town)
Municipality:
2. Fundraising requirements: (shinny parents are not required to fundraise)
Each family is required to work 6 hours at the Zurich Bean Festival in August 2011 (Last Saturday in August). Shifts are filled on a first come-first served basis, not on what your shift was last year. You will sign up for your shift at the registration on April 8th. Registrations received after this will be just be assigned a shift-you will not be able to choose.
Name(s) of participating parents/guardians: (18 years or older)
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If one name, shift will be 6 hours. Two names will be 3 hours each.
Marc Crane (519-236-4766) will be contacting you about your shift. Please remember your obligation to help out. The registration fees do not completely cover the costs associated with hockey. These fundraising activities help us keep hockey affordable to all.
A cheque for \$ 200.00, post-dated for Sept 30, 2011 is required. It will only be cashed if your volunteer BeanFest fundraising requirement (6 hours per family) is not fulfilled.
1.

3. Player information: <u>Player #1 name</u> :	_ Birt	h date (M/	D/Y)		
(For age group see pg. 4) Age Group:		Sex	: Male () Fema	le ()
Player #2 name:	Birth	date (M/D	D/Y)		
Age Group:	Sex:	Male ()	Female	()	
Player # 3 name:	Birth	Date (M/I	O/Y)		
Age Group:	Sex:	Male ()	Female	()	
4. Health Issues and Concerns:		Please pu	t yes where a	ppropriate	
Descriptions:		player #1	player #2	player #3	
Allergies					
Hearing problem					
Heart condition					
Takes medication regularly					
Hospitalized in the last year					
Asthma					
Wears glasses (are lenses shatter proof?)					
Diabetic					
Epileptic					
Had an illness lasting more than one week					
Had injuries needing medical attention in the last year					
Had an operation in the last year					
Received outside counseling					
Any other health issues					
Wears a MEDICALERT bracelet or necklace Does the player have health problems that would interfere with his/her participation full hockey program?	n in a				<u> </u>
Please give details below if you answered YES to any of the health quest	ions: _				
Would you be willing to or know of someone that would like to help as a	Coach	/ Manager /	Trainer / or	ı -ice helper	/ Director?
Name: Age Level that you'd like to he	elp with	n:			
5. Waiver: Please read and sign the mandatory waiver rewill not be allowed on the ice until this form is signed.	elease	form on	the last p	age. You	child

Season Passes can be ordered for the 2011/2012 season. They are \$60.00/ pass. Each pass is for one person and will include admission to all ZMAA games played at the Zurich Arena, including tournaments and playoff games. (See next pg. to order.)

New Hockey Registrants of ZMAA(new mite players also): Please include a photocopy of your Birth Certificate with this form. Players will not be allowed on the ice without a completed registration form, payment and a photocopy of the child's birth certificate.

	Description		Cost on or before April 8 th ,2011
Shinny	Born in 1995-2002		\$175.00
Mite	2005 and later		\$255.00
Novice	2003 & 2004		\$330.00
Atom	2001 & 2002		\$330.00
Peewee	1999 & 2000		\$380.00
Bantam	1997 & 1998		\$405.00
Midget	1994 & 1995 & 1996		\$425.00
Juvenile	1992,1993 + (+ 5 over age to 1991)		\$450.00
Goalies	ZMAA provides pads and blockers to goalies peewee age & below	Per age group above	Per age group above ↑↑
Goalies	Bantam & above		\$210.00

Payment Totals:

Payment Tota	IS:
Child # 1 Registration Fee	\$
Child # 2 Registration Fee	\$
Child # 3 Registration Fee	\$
Season Pass X \$60.00	\$
Hockey Skills Development Sessions Available for Atom to Midget level players. Dates are Sept 7,12,14,19,21 from 6-7pm & 7-8pm; age and skill will determine which group the skater is in. We're glad to welcome instructors Jamie Ramer and Dwight Gingerich back again this year. Cost is \$50.00 for the 5 sessions. Name:	\$ \$ Cheque's are made payable to: Zurich Minor Athletic Association or ZMAA
Registration Total: You may date the cheque for October 15,2011	\$
Unfulfilled Fundraising Shifts (per family) (will only be cashed if you do not work at the Beanfest in 2011)	\$200.00 Dated September 30/2011 (A separate cheque)

7 B. If necessary , (and only if necessary- post dated cheques registration total into 2 equal payments with 2 post-dated cheques registration form):	equire extra effort for the treasurer) you may divide the ues with the following dates (these cheques must accompany the
Cheque Dated September 15,2011 \$	Cheque Dated November 15,2011 \$

Waiver Form for Zurich Minor Athletic Association Sports (To Be Used for Players UNDER the Age of 18)

Parent/ Guardian names:
First Name(s) AND Ages of All Participating Children:
ALL PROGRAMS AND ACTIVITIES HAVE ITS RISKS: I allow my child to participate in the game of hockey because it is physically and mentally challenging. In consideration of my child's participation in such programs, activities and events, I hereby acknowledge that I am aware of the risks and hazards associated with or related to this activity. The risks and hazards include, but are not limited to: Injuries from executing strenuous and demanding physical techniques in hockey; Injuries from ice surfaces and dressing rooms including bacterial infections and rashes; Injuries resulting from falls to the ground due to uneven or irregular terrain or ice surfaces; Injuries from collisions with walls and hockey equipment; Injuries resulting from failure to properly use any piece of equipment or from the mechanical failure of any piece of equipment; Spinal cord injuries which may render my child permanently paralyzed; Injuries from contact, colliding or being struck by other participants, spectators, equipment or vehicles; Injuries resulting from vigorous physical exertion and strenuous cardiovascular workouts; Injuries from exerting and stretching various muscle groups; and
. Travel to and from competitive events and associated non-competitive events which are an integral part of the organization's activities. Furthermore, I am aware: . That injuries sustained in hockey can be severe; . That my child may experience anxiety while challenging him/herself during the activities;
. That my child may come into close contact with other participants, including the possibility of accidental and unexpected contact; . That risk of injury is reduced if my child follows all rules established for participation; and . That my child's risk of injury increases as he/she becomes fatigued. Website:
I also allow my child's/children's picture and name (including surname) to be posted on our website and I also understand they may be mentioned in an article on the Zurich Minor Hockey website.
I AGREE TO BE RESPONSIBLE FOR MY CHILD: My child is participating voluntarily in these activities, events and programs. I agree that there are risks in hockey as described above. By participating voluntarily in these events, activities and programs, I am exposing my child to these risks and hazards. I agree to accept them and be responsible for any injury or other loss which my child might receive while participating in these events, activities and programs.
If something happens to my child, I release the organizers of responsibility for any claims, demands, actions and costs which might arise out of my participation. In this Agreement I understand organizers to mean: the Zurich Minor Athletic Association and its directors and employees, all member Leagues and Clubs, their directors, officers, members, employees, volunteers, officials, participants, clubs, agents, sponsors, owners/operators of facilities and their representatives. I ACKNOWLEDGE MAKING THIS AGREEMENT:
I have read and understood the terms and conditions of this agreement, and by signing it voluntarily, I am agreeing to abide by these terms. By signing this form you give up important legal rights. Please read carefully!
Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date