**2017 Sicamous Hockey School Registration.**

Please complete the following form and email it to the Sicamous Hockey School registrar:

shs@cablelan.net or Sicamous Hockey School Box 665, Sicamous B.C. V0E 2V0

Players Name: \_\_­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother's Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Father's Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home and Cell #'s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bi­­­­­rthdate: (MM/DD/YY) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medical #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Select group level and position for your child.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Initiation (5 yrs. to 8 yrs. old) |  | Forward |
|  | Atom (9 yrs. to 10 yrs. old) |  | Defence |
|  | Pee Wee/Bantam (11 yrs. and up) |  | Goalie |

Select a Jersey size:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Youth Small |  | Adult Small |
|  | Youth Medium |  | Adult Medium |
|  | Youth Large |  | Adult Large |
|  | Youth X L |  | Adult XL |

Additional Comments:­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Please complete the waiver page on the following page and email in when you submit the application.**

**Sicamous Hockey School**

30th Annual Sicamous Hockey School Release Form 2017

In consideration of the acceptance as a student in the SICAMOUS HOCKEY SCHOOL program we, the undersigned parents/participant, release, remise and discharge the SICAMOUS HOCKEY SCHOOL from all claims, actions, causes of actions, damages and demands by the undersigned parents for loss or injury resulting directly or indirectly from the participation of our child in this program.

The undersigned parents/participant covenant and agree to indemnify and save harmless SICAMOUS HOCKEY SCHOOL from all claims, actions, causes of action, damages and demands which may be brought by or on behalf of our child against SICAMOUS HOCKEY SCHOOL arising out of his/her participation in the program, including all costs, damages and expenses in defending any such claims or actions and against any loss arising there from.

We acknowledge that the student cannot be accepted into this program but for our executing this release and indemnity.

We have read the release and understand that it is a full final release of all claims for injuries and damages sustained in the SICAMOUS HOCKEY SCHOOL program and have read over the agreement to indemnify and understand the responsibilities we have assumed there under.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Players Name / Names: Parent/Guardian Signature:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:

Box 665, Sicamous, B.C. V0E 2V0 \*

www.sicamoushockeyschool.ca