

RIPLEY MINOR HOCKEY



Register any time prior to May 16, 2011

- fax 519-395-4107
- drop your registration off at the Arena office
- drop off at Municipal Office

Early Bird Special Before May 16, 2011
Postdate cheques for September 15, 2011

RIPLEY HURON RECREATION DEPARTMENT
17 Queen Street P.O. Box 130 Ripley, ON N0G2R0
Phone: 519-395-2909 Fax: 519-395-4107
Email: recreation@huronkinloss.com www.huronkinloss.com

Your copy to retain for your records.

Family Information

Parents Name: _____ Home Phone _____ Work _____
911 Address, Box No. _____
City _____ Province _____ Postal Code _____ Email Address _____

Emergency Contact (if different from above)

Name _____
Relationship _____ Phone _____

PLAYER INFORMATION

Fee Schedule is on reverse

Player 1

First, Initial, Last Name: _____ Date of Birth mm/dd/yyyy ____/____/____
Team Last Played with: _____ **KM to Ripley Post Office** _____ **KM to Next Centre Post Office** _____

<input type="checkbox"/> First	<input type="checkbox"/> Tyke 2006,2007	<input type="checkbox"/> Atom 2001, 2002	<input type="checkbox"/> Midget 1996, 1995, 1994
<input type="checkbox"/> Boy	<input type="checkbox"/> Sr. Tyke 2005	<input type="checkbox"/> Peewee 1999, 2000	<input type="checkbox"/> Juvenile 1993, 1992, 1991
<input type="checkbox"/> Girl	<input type="checkbox"/> Novice 2003, 2004	<input type="checkbox"/> Bantam 1997, 1998	

Player 2

First, Initial, Last Name: _____ Date of Birth mm/dd/yyyy ____/____/____
Team Last Played with: _____ **KM to Ripley Post Office** _____ **KM to Next Centre Post Office** _____

<input type="checkbox"/> First Year	<input type="checkbox"/> Tyke 2006, 2007	<input type="checkbox"/> Atom 2001, 2002	<input type="checkbox"/> Midget 1996, 1995, 1994
<input type="checkbox"/> Boys	<input type="checkbox"/> Sr. Tyke 2005	<input type="checkbox"/> Peewee 1999, 2000	<input type="checkbox"/> Juvenile 1993, 1992, 1991
<input type="checkbox"/> Girls	<input type="checkbox"/> Novice 2003, 2004	<input type="checkbox"/> Bantam 1997, 1998	

Please note that if you are in agreement, your signature is required in the appropriate area provided.

Web Site Consent

By checking the box below I/we understand that consent is being provided to permit personal information about the above named participant to be posted to the Township of Huron-Kinloss web site. Please be advised that while participating in Ripley Minor Hockey your child's personal information may be disclosed. The type of personal information that may be disclosed on the Township of Huron-Kinloss web site may include; photograph of the above identified participant, including team photograph, awards or prizes received by the above identified participant, team lists including the name and team number of the above identified participant

Please check one of the boxes

I object to my child's personal information being disclosed on the Township of Huron-Kinloss web site as described above.

I consent to the disclosure of personal information as described above on the Township of Huron-Kinloss web site.

I/we further understand that this consent is valid for one year and may be withdrawn by me/us at any time, upon written notice. The undersigned Parent/Guardian hereby releases, remises and forever discharges Ripley Minor Hockey and their heirs, executive, coaches, trainers, managers, committees and instructors of all actions, causes of actions, damage claims and demands whatsoever which may arise from any incident to the participating child and/or player and/or property while practicing, playing, traveling to or from sport-related events arranged by, through or supervised by said association

Signature of Parent(s)/Guardian(s)/Adult Participant

Date

Ripley Minor Hockey Registration 2011-2012

An official Income tax Receipt will be issued upon request.

Post Date your Cheque
Sept. 15

RIPLEY HURON
RECREATION DEPARTMENT
17 Queen Street
P.O. Box 130
Ripley, ON N0G2R0
Phone: 519-395-2909
Fax: 519-395-4107
Email:
recreation@huronkinloss.com
www.huronkinloss.com

No. of Participants	Early Bird Special	After May 16	
One Child	275.00	375.00	
Two Children	480.00	580.00	Method of Payment
Three Children	660.00	760.00	____Cash
Four Children	660.00	760.00	____Cheque

Received by: _____

Your Copy



Office Copy

No. of Participants	Early Bird Special	After May 16	
One Child	275.00	375.00	
Two Children	480.00	580.00	Method of Payment
Three Children	660.00	760.00	____Cash
Four Children	660.00	760.00	____Cheque

Received by: _____



Ripley Minor Hockey is proud to offer to **Power Skating clinics** to the younger teams as part of their registration with the Ripley Minor Hockey Program. Participants are required to attend the Saturday morning sessions. Your coach will notify you of the time that has been given to your team.

Important Information

Register anytime prior to **May 16, 2011 to take advantage of the Early Bird Special.** Drop forms off at the arena office, Municipal Office, Fax 519-395-4107

Acceptance of Registrations After May 16 will be at the discretion of Ripley Minor Hockey Executive.

Ripley Minor Hockey requires accurate number of registrations in order to determine the final composition of teams.

Post date cheques for **September 15, 2011**

Make cheques payable to the **Township of Huron-Kinloss**

Parents Auxiliary Notice

A deposit **cheque of \$200.00** is requested from each family at the time of registration for the booth. The deposit cheque will be held until volunteer time in the arena booth has been fulfilled. The Parents Auxiliary executive would like to thank all the volunteers in the Snack bar for helping to make our community better with sport

Ripley Minor Hockey would like to invite all interested in coaching to indicate this by signing this form. A coaching application will be forwarded to you to be filled out and returned to any minor hockey executive member or call Dan at 395-3668. Coaching is a very rewarding experience. Teaching skills for hockey, and life while having fun all at the same time.

Name: _____ Phone Number _____

Email: _____

Previous Coaching Experience: _____ Clinics _____

If you would like to referee please contact any Ripley Minor Hockey executive member.