

McLaughlin Med's Hockey League

Player Registration Form

2024 - 2025 Season

Players must be 39 years of age or older by December 31, 2024. New players must submit proof of age with this registration application.

Name: _____ **Date of Birth:** _____ **Age:** _____

Address: _____ **City:** _____

Email: _____ **Phone #** _____

Position (circle one): Forward Defense Goalie Skill Level (circle one): A B C

Fees & Payments:

- 2024 - 2025 Season Fees – \$600.00
- \$200.00 deposit due with registration no later than August 1, 2024
- \$200.00 due September 30, 2024, with balance due no later than October 31, 2024.

Payments and Registration Forms can be submitted electronically to:

frank.medeiros@sympatico.ca

Registrations will only be accepted with a \$200.00 deposit and a completed Waiver Form. Registration is first come first serve.

For those new to the league – let us know who referred you: _____

WAIVER FORM

I, _____ (print name) hereby relieve the McLaughlin Med's Hockey League and its officers and agents, from any future loss or claim due to any physical injury, personal or property loss of any description, which may occur at any time during my participation in league play and or it's associated activities due to my own actions or the actions of others.

Participant Signature: _____ **Date:** _____

Emergency Contact: _____ **Phone #** _____