



Wallaceburg Minor Hockey Association

1644 Dufferin Ave. P.O. Box 22013, Wallaceburg, ON N8A 2X0
www.wallaceburghockey.com



Please Print Clearly (All information must be filled in)

New registrants to WMHA must supply a photocopy of each child's birth certificate and complete Respect in Sport Certification.

Player's Name:	M/F	Date of Birth: (Yr/Mo/Day)	OWHA	OMHA	New	Division	Registration Amount
1) _____	_____	____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
2) _____	_____	____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
3) _____	_____	____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
4) _____	_____	____/____/____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Sock Fee \$ _____

Midget Players \$250.00 Jersey Deposit (refunded with returned of jersey) \$ _____

Total Due = _____

(Refundable with 8 hours of volunteering with WMHA) Volunteer Fee (\$200 cheque post dated to Feb. 28, 2020) \$ _____

Raffle Ticket Numbers _____ Voluntary Raffle Tickets _____

Mother's Name/Full 911 Address: _____ Phone #: _____ Cell #: _____ Email Address: _____	Father's Name/Full 911 Address: _____ <small>Including Postal Code if Different</small> Phone #: _____ Cell #: _____ Email Address: _____
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- Note:
1. Registration fee includes OMHA/OWHA insurance.
 2. All players participating in WMHA program must wear all mandatory equipment including mouth guard, neck guard and chin strap. ☐ (Initial)
 3. All NSF cheques will be charged a \$50.00 charge. ☐ (Initial)
 4. **ALL Fees MUST be paid by August 31st, NO EXCEPTIONS! Players not paid in full by August 31st, will be issued a refund for any deposits made and not permitted to play the season. WMHA must be given official approval by August 31st from funding agencies to consider funded players paid in full.** ☐ (Initial)
 5. Refunds will be issued upon request until September 30th. Any refund requested after September 30th will be prorated.
 6. Players/Parents must return any and all equipment loaned by WMHA (jerseys, goalie equipment, etc.) at the end of the season in good condition. Those who fail to do so will be charged the cost of replacing the equipment and will not be able to register with the Association until payment is received. ☐ (Initial)

PARENT CONSENT

I hereby grant permission for _____, _____ to participate in the Wallaceburg Minor Hockey Program. I grant permission for the designated team or association official to obtain medical treatment for my child(ren) in the eventuality that I am unable to grant such permission. I grant permission for the designated team or association official to take pictures of my children during the Hockey Season and I grant permission for those pictures to be used in media including social media.

(Parent or Guardian's Signature)

20____/____/____
Mo Day

Wallaceburg Minor Hockey Registration Receipt

Registration Fee \$ _____

Funding ☐ _____

Cash ☐ Amount Paid _____ Date Paid _____

Cheque ☐

Credit Card Mastercard ☐ Visa ☐ American Express ☐

Amount Paid _____ Date Paid _____

Cheque #	Date	Amount
	March/April	\$
	June 1	\$
	August 1	\$

Please note: A \$250 payment per player is required before May 31st, to be qualified for the Early Registration Fee.

Association Official's Signature

Date