

Dartmouth Whalers Major Bantam Hockey Club - Player Registration Form Spring ID Camp 2013 - May 18, 19, 20 & 23 @ Dartmouth Sportsplex

Player Inform	nation						
Name				Birthday			
Address				Medical Ins #			
Street / Apt				School			
City		Postal Code		Email			
Any known allergie	es?						
Any medical cond	itions?						
Position	LW	С	RW	Height (ft / inch)	<u> </u>		
	LD		RD	Weight (lbs)			
		G		Shot (L or R)	L		R
				Jersey Size	S	M L	XL
2012/13 Team	[
2011/12 Team							
Parent/Guard	lian Informatio	on					
Fathers Name							
Father Address (if	different than Playe	ifferent than Player)					
Street				Father - cell			
City		Postal Code					
							
Mothers Name				Mother - email			
Mother Address (i	f different than Play	er)		Mother - phone			
Street				Mother - cell			
City		Postal Code					
Parential / Guardian Consent and Waiver							
I, acknowledge that participation in athletics and recreation activities involves the							
risk of personal injury. In consideration of the use of the facilities, premises and equipment of the Dartmouth							
Whalers Major Bantam Hockey Club by myself and/or my child for athletics and or recreation activities I accept							
that risk, on behalf of myself and or my child, regardless of the nature of the injury. I agree and understand the Dartmouth Whalers Major Bantam Hockey Club, its officers, employees, agents and representatives shall not be							
liable for any personal injury, death, loss of property or damage as a result of my child's participation in athletics							
and/or recreation activities with Dartmouth Whalers Major Bantam Hockey Club, whether caused directly or							
indirectly by the fault or negligence of the Dartmouth Whalers Major Bantam Hockey Club, it officers, employees, agents or representatives or otherwise. I hereby release, indemnify and hold harmless the							
				ers, employees, a	•		
all claims, cau	uses of action, o	costs, expens	es or demands	which myself, m	ny child, my he	eirs, executor	
administrators	s or assigns ma	y have with re	espect to any si	uch injury, death	, loss or dama	ige	
Parent / Guardian	signature					Date	
	olgilato						
Witness signature)					Date	
Please forward co	mpleted registration	form with cheque	e (\$150) payable to	Dartmouth Whalers	Major Bantam Hoo	key Club" to:	
					-	-	
Greg Taylor, Gene	-	alva v Olivita		Deit			
21 Mountain Ash	rs Major Bantam Ho Court	CKEY CIUD		Paid Chq #	L		
Dartmouth NS B2							