2010 Four Season Sports Roller Hockey Registration Form

Personal Information: (Please PRINT clearly)

Player's name:_____

Parent's/Guardian's Name(s):_____

Address:_____City:_____

Province ____Postal Code:_____ Date of Birth (YY/MM/DD): ____/____ /____ Sex: ◯M ◯F

Telephone # (Home): ( )_____Telephone # (Work): ( )_____

E-mail Address:_____

Do you have any allergies/health problems? ◯Yes ◯No **If yes, specify:**_____

Emergency Contact (Name):_____Phone #: (___)_____

League you are enrolling in (circle one):**Learn to Play 6 and under – Youth 10U, 12U, 14U - Mens Leagues – Coed Leagues**

Have you played ice hockey? ◯Yes ◯No

If yes, what level last played? _____

Preferred Roller Hockey Position: ◯Forward ◯Defense ◯Goaltender

How did you hear about our league? ☐ 4SS Visited Your Rink ☐ Newspaper ☐ Referral ☐ Internet ☐ Sports Store ☐ Poster ☐ Other

Players you would like to be teamed with: **1.** _____
2. _____

Are you interested in getting involved? ☐ Coach ☐ Timekeeper ☐ Referee

NAME _____ **Phone #** _____

League Fees:

Mens Leagues. 27+ & 27 Under ($225 per player)
Coed & Youth Leagues ($185 per player)
6 and Under Cub – Learn to Play Program ($119 per player)
Youth Goalies Play for $40
****Please make cheque payable to "4SSRH"****

Four Season Sports Roller Hockey
4 Brock Street,
Paris, ON.
N3L 1J3

Phone (519) 771-8181
WWW.4SS.CA

The undersigned is responsible for the conduct of the player while participating in this program. The local league as well as the governing bodies shall govern the player. It is understood that the undersigned person of legal age or legal guardian shall not hold the local league or the governing bodies, their instructors, administrators officials or the facility used liable in the event of injury or loss.
The player listed above is registered under the care of the undersigned and assumes all risks through enrolment in this program with the understanding that although play is "non-contact", it consists of physical interaction capable of injury. **Four Season Sports Roller Hockey does not issue refunds.**
I have read and I understand all items on this player's card.

Player (if at least 18 years of age) or Parent/Guardian signature:_____ Date:_____

If you or someone you know are interested in being a House League Sponsor ($260)

This sponsorship includes company name on set of jersey's, sponsors plaque and a place on 4SSRH & CRHL website under sponsors (possible link to your company website)

Sponsor Name_____ Contact _____ Phone#_____