



2018 Summer Hockey Registration Form

Submit this form to the secure lockbox at Hectors
 NOT TO BE USED FOR WINTER HOCKEY

REGISTRATION OPEN NOW – Closing Saturday March 24th at 5:00 PM at Hectors

12 Teams / 22 Games: April 25th to second week of September

All games April through August are Wednesday nights, 3 September games vary nights

Name: _____

Best contact details _____

We need the single best contact method and details to reach you – this is especially important for pool players

<input type="checkbox"/> SUMMER FULLTIME PLAYER	\$285	Cheque or Credit Card (Visa or MasterCard only)
<input type="checkbox"/> SUMMER POOL PLAYER	Free	No charge to register, \$15/game skaters & goalies

NOTE: You must also register for the 2018-19 Winter Hockey Season (a separate form) and be a member in good standing to remain eligible to play Summer Hockey

FWD DEF GOAL Position in WINTER (default choice)

FWD DEF GOAL Position in SUMMER ***IF DIFFERENT FROM WINTER***

We will attempt to accommodate your choice below, but team balance will take precedence

I would like play for a new team and meet new players (this is the default choice)

I would like to play with my buddy (1): _____

I would like to play for team: _____

**PAYMENT for fulltime application must be by cheque, Visa or Master Card and must accompany this form
 No other form of payment is accepted**

To pay by CHEQUE: Dated “April 1, 2018” and made payable to “BOHC”
Or to pay by VISA / MASTERCARD (ensure form is placed in secure lockbox at the club):

Card # _____ **Expiry Month** _____ **Year** _____

Signature for Credit Card _____ **Date** _____

WAIVER

I wish to participate in the activities Burlington Oldtimers' Hockey Club Inc and hereby assume all risks and hazards incidental to such participation, including during, transportation to and from the activities. I also agree to participate within the by-laws of the Constitution. I, therefore, do hereby waive, release, absolve and agree to hold harmless the Burlington Oldtimers' Hockey Club, its sponsors, supervisors, participants and any person transporting me to and from the activities of any claim arising out of an injury loss or damage to myself.

I further acknowledge the City of Burlington By-law with respect to the consumption of alcohol on City property and agree to abide by that by-law at all times. If I am charged under this by-law. I understand the 'Club' may suspend me and the length of that suspension will be determined at a mandatory hearing held by the discipline committee. I also acknowledge that all Club notifications pertaining to constitution and by-laws will be given via the BOHC website, email, newsletter, and posting in the BOHC clubhouse.

Signature for Waiver _____ **Date** _____

Date Entered: _____
 (office use only)