Winter DAYTIME Registration

2026 – 2027 SEASON

BURLINGTON OLDTIMERS' HOCKEY CLUB INC.

3521 Mainway, Burlington, ON L7M 1A9 (905) 637-8351 www.bohc.ca

NAME _____ **Preferred Phone #** _____

EMERGENCY CONTACT _____ **and Phone #** _____

ADDRESS _____ **POSTAL** _____
(STREET) (CITY)

BIRTH DATE _____ **EMAIL** _____
MONTH / DAY / YEAR (PRINT NEATLY)

NEW MEMBERS: PROOF OF AGE MAY BE REQUIRED

CIRCLE CHOICE BELOW:

NEW Members: **$500** ($60 Club Dues & $440 for hockey**) – pay online -** credit card only;
POOL: **$60** (Club Dues) **– pay online -** credit card only.

Existing BOHC Members: **$440 – pay online -** credit card only
POOL: (pay $20 per game).

Are you a current member of the BOHC? Yes No

PREFERRED POSITION (pls circle one): **C** **LW** **RW** **D** **GOAL**

NEW MEMBERS ONLY (for placement at the right division level):
SKILL LEVEL, YEARS PLAYED (1) (2)

If you know a Burlington Oldtimer, which winter division does he feel you should play in?:

NAME _____ SUGGESTED DIVISION _____

I wish to participate in the activities Burlington Oldtimers' Hockey Club Inc (BOHC) 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 BOHC, 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. If I am charged under this by-law, I understand the BOHC may suspend me from play. I also acknowledge that all BOHC notifications pertaining to constitution and by-laws will be conveyed via the BOHC website, email notification and/or posting at Hector's Lounge.

SIGNATURE _____ **DATE** _____

FOR LEAGUE USE ONLY

PAYMENT REC'D:

APPROVAL: MEMBERSHIP CHAIRMAN _____ **SENIORITY DATE** _____ rev. Aug 2025