

# YORK SIMCOE EXPRESS

Hockey Association Inc.

## TRYOUT Registration Form

<b>Player Name:</b>		<b>Season:</b> 2010-2011 <hr/>	
<b>Address:</b>			
Street			
City	Province      Postal Code		
<b>Date of Birth (yyyy-mm-dd):</b>			
<b>Team Information - Trying out for</b>			
<b>Position:</b>	<b>Shoots:</b>	<b>Height:</b>	<b>Weight:</b>
<b>Division:</b>			
<b>Previous Team Information - Circle One</b>			
<b>Team Name:</b>	<b>Category : H/L   AE   A   AA   AAA</b>		
<b>Division: Minor or Major - Initiation - Novice - Atom - Peewee - Bantam - Midget - Junior - Juvenile</b>			
<b>Father Information</b>			
<b>Name:</b>		<b>Home #:</b>	
<b>Address ( Blank if same as player ):</b>			
<b>Work #:</b>	<b>Cell #:</b>	<b>E-mail:</b>	
<b>Mother Information</b>			
<b>Name:</b>		<b>Home #:</b>	
<b>Address ( Blank if same as player ):</b>			
<b>Work #:</b>	<b>Cell #:</b>	<b>E-mail:</b>	
<b>Emergency Contact</b>			
<b>Name:</b>		<b>Phone #:</b>	
<b>Address:</b>			
<b>Information</b>			
<b>Member's Name (Print):</b> _____		is a resident of this	
<b>Home Centre (Pls Print):</b> _____		and will register in above home centre for the	
2010 / 2011 _____		season as soon as _____ Minor Hockey holds its registration.	
<b>Waiver: Please read carefully</b>			

I, the undersigned certify the above information to be true and in consideration of the granting of this certificate to me with the privileges incident thereto, and by signing this certificate I have become subject to the rules, regulations and decisions of Hockey Canada, it's Board of Directors, its Branches and/or divisions which may be restrictive in some areas such as movement from team to team, conduct etc. and I agree to abide by such rules, regulations and decisions of Hockey Canada, its Board of Directors, its Branches and/or divisions. I understand that the York Simcoe Express Hockey Association Inc. will not be held responsible for any injuries while participating in league activities.

\_\_\_\_\_  
Parent/Guardian's Name (print)

\_\_\_\_\_  
Member's Name (Print)

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date

**AURORA, BRADFORD, EAST GWILLIMBURY, GEORGINA, NEWMARKET, SCHOMBERG**

N.B. As per the O.M.H.A. rules, every player must register with their home centre or sign a "Letter of Intent to Register" (above) before they can try out for a zone AAA team.