



## 2009 Regina Inline Hockey League Individual Registration Form

First Name:	Last:
Phone Number:	DOB (dd/mm/yy): (/)
Address:	
Street Email Address:	City Postal Code  Health Card:
Mother:	Father:
SELECT DIVISION (Age as of De	ecember 31, 2008) (All divisions are co-ed
	_] 12 & Under [] 14 & Under [] 17 & Under [] (1996-1997) (1994-1995) (1991-
Registration Cost Per Player:	
Goalies - \$100.00 Player - \$175.00	
REFEREES (12 & older)	COACHES
Are you or you child interested in I YES [] NO []	being a referee? Are you interested in coaching?  YES [] NO []
AFFILIATED PLAYER	
s your son/daughter interested in by NO []	being put on the affiliated players list?
the right to place players in alternate divisions or will be made available except for medical reasons	e depending on the number of players registered and the availability of Coaches. RIHL reserves refund the full registration fee should a particular division not be available. No other refunds in which case a medical certificate is required. A \$35.00 administration fee will be deducted replacement player is found. RIHL reserves the right to charge a \$50 NSF charge on all NSF
I have read and understand the lea	ague policies and procedures:
Parents Signature	Print·





