

# BUCKS ICE HOCKEY

## SPRING REGISTRATION FORM

**PLAYER'S PERSONAL INFORMATION**

LAST NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

Address 2 : \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

HOME PHONE: (    ) \_\_\_\_\_

CELL PHONE: (    ) \_\_\_\_\_

SOCIAL SECURITY NO.   n/a   \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_

EMERGENCY CONTACT: (    ) \_\_\_\_\_

**SCHOOL INFORMATION**

SCHOOL: \_\_\_\_\_

GRADE: \_\_\_\_\_

**PLAYER'S HOCKEY INFORMATION**

(Please Circle One)

RETURNING CB WEST PLAYER: YES    NO

LAST SHSHL TEAM:    VAR    JV    MS

CLUB HOCKEY EXPERIENCE:

Mite    \_\_\_\_\_    PEEWEE    \_\_\_\_\_    MIDGET 16    \_\_\_\_\_

SQUIRT    \_\_\_\_\_    BANTAM    \_\_\_\_\_    MIDGET 18    \_\_\_\_\_

TOTAL YEARS TRAVEL EXPERIENCE \_\_\_\_\_

HIGHEST CLUB LEVEL PLAYED:

(eg.: Non-League Travel = AA)

AAA    AA    A    B    In-House    None

PREFERRED POSITION: \_\_\_\_\_

CLUB TEAM: \_\_\_\_\_

**PARENT REGISTRATION AGREEMENT**

I, \_\_\_\_\_, Parent or Natural Guardian of the above-named Player, agree that I have read and signed the USA Hockey & CBW "Bucks" Ice Hockey Waivers of Liability, CB West Student-Athlete Code of Conduct and Parent Code of Conduct Forms and agree to be bound by each. I further agree that upon signing this Registration Form, I shall be bound by all Bylaws, Rules and Regulations adopted by the CB West Ice Hockey Club, Inc. I also understand and agree that the CB West Ice Hockey Club, Inc., shall be purchasing ice and making financial commitments based upon my registration and agree that upon signing this Registration Form I shall pay all fees and costs assessed by the CB West Ice Hockey Club, Inc. as they accrue, including, as follows:

**\$275.00\* Non-Refundable Deposit..... (Due at registration)**

I agree that ALL payments are owed regardless of whether the player subsequently misses games due to injury or illness and that I, or my son/daughter, may be suspended or expelled from the Team/Club due to non-payment of fees or violation of any Club rule or regulation. As a player, I agree to follow the Code of Conduct and I will respect my teammates, coaches, the officials and my opponents.

**SIGNED: PARENT or GUARDIAN**

**SIGNED: PLAYER**

X \_\_\_\_\_

X \_\_\_\_\_

DATE: \_\_\_\_\_

DATE: \_\_\_\_\_