**CANADIAN FIELD HOCKEY & CULTURAL CLUB**

[WWW.CFHCC.CA](http://WWW.CFHCC.CA) | cfhcc@hotmail.com

**Club Registration Form**

## **PLAYER INFORMATION:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| First Name: |  | Middle: |  | Last: |  |
| Address: |  |
| City/ Town: |  | **Postal Code:** |  |
| Home Phone#: |  | **Cell Phone#:** |  | **E-mail :** |  |
| Date of Birth : |  | **Gender:**  |  |  | **FHO Registration #** |  |
| Allergies/ Other: |  |

## **UNIFORM SIZE:**

|  |  |
| --- | --- |
| Uniforms will include hockey jersey (2), shorts (1) and socks. Please select size below. Standard Adidas sizes apply. | **Enter Size Below** |
| **Youth:** | XS- Extra Small | S-Small | M-Medium | L-Large | XL-Extra Large |  |
| **Adult:** |  | S-Small | M-Medium | L-Large | XL-Extra Large |  |

## **JERSEY NUMBER:**

Jersey numbers will be assigned on receipt of registration fee. Please provide two choices for numbers.

If the player is born in 2000 or earlier select between # 1 and # 25. For 2001 and later select numbers between # 25 and # 50.

|  |  |  |  |
| --- | --- | --- | --- |
| **First Preference:** |  | **Second Preference:** |  |

## **VOLUNTEER INFORMATION:**

This organization is run by volunteers. Please indicate in which capacity you can provide support.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Coach | **🌣** | Fundraising | **🌣** | Communications | **🌣** | Social Committee | **🌣** |
| Assistant Coach | **🌣** | Sponsorship | **🌣** | Administration | **🌣** | Community Outreach | **🌣** |
| Team Manager | **🌣** | Events | **🌣** | Marketing | **🌣** | Other | **🌣** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | Phone#: |  | Email: |  |

## **TERMS AND CONDITIONS:**

* Players must arrive 15 minutes before practice begins and ends. If a player cannot attend a practice, the Coach must be notified in advance.
* Parents/ Guardians are responsible for ensuring that the players wear the right protective equipment including mouth guard & shin pads and hold sufficient medical coverage for the full school year. All players must be registered with [Field Hockey Ontario](https://www.fieldhockeyontario.com/).
* Coaches will be responsible for team selections. Only Coaches, Assistant Coaches and Team Managers will accompany players onto the field.
* Any concerns or issues of any kind should be raised in writing to cfhcc@hotmail.com.
* Tournament fees are due to the Team Manager before the first game or a late fee ($50/-) will apply.
* For indoor practices, only players and Coaches are allowed into the Indoor Gym. Food and water is not allowed into the Indoor Gym.
* Players, Coaches, Parent/ Guardians are expected to conduct themselves in a respectful and courteous manner when representing the Club at practices and other events. Any player wishing to represent another club for a game, league, tournament or other shall discuss the matter in writing to cfhcc@hotmail.com before registration to avoid any Conflict of Interest.
* CFHCC has a zero tolerance policy for alcohol or drugs at any CFHCC hosted event.
* The players, parents and/ or guardians agree not to take any legal action against the Club in case of any disagreements, issues or concerns. Any and all such matters shall be raised to and dealt with by the Board of Directors. You consent to grant the club permission to publish photographs and names of players in print and on social media.
* CFHCC has the right to suspend or terminate an individual membership at any given time.

CFHCC will not be held responsible for:

* Any injury, accident, or lost items during games or practices. CFHCC will not be responsible for providing any insurance.
* Any risks and hazards associated with travel to and from practices or competitive events. CFHCC will not be responsible for providing players with a ride to practice or games.
* Any communication with Field Hockey Ontario with regard to camps, leagues or tryouts.
* Any kind of violence during practices, tournaments or leagues.

I UNDERSTAND AND AGREE TO THE CONDITIONS OF REGISTRATION AS SPECIFIED ABOVE AND CERTIFY THAT THE INFORMATION PROVIDED BY ME IS CORRECT AND COMPLETE:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| *Printed Name of Parent/ Guardian* |  | *Signature of Parent/ Guardian* |  | *Date Signed* |

|  |  |
| --- | --- |
| **PAYMENT OPTIONS:** | **REGISTRATION FEES** |
| * **E-TRANSFER (Q: WHICH CLUB / A: CFHCC1 (PREFERRED)**
* **CHEQUE PAYABLE TO CANADIAN FIELD HOCKEY & CULTURAL CLUB OR CASH**
 |  | * **Annual $400/-**
* **Per Season $250/-**
* **Uniform Fee $120/-**
 |