



Early Bird Registration will run beginning May 1, 2020 through to August 1, 2020. U7 years 2 & 3 (previously initiation) \$435, U8 (previously minor novice) \$485, U9 (previously major novice) \$535 and U11 (previously Atom) – U18 (previously Midget) \$610. Fees will increase by \$100 for returning players U7-U18 after August 1, 2020 deadline. Register early to guarantee yourself a spot. ***There is a first time player rate of \$135. Only Children that were born in 2014-2016 that have NOT played hockey before qualify.*** This year, your OMHA registration will be accepted subject to the completion of the online Respect in Sport Parent Education Program (RISPEP) and Rowan’s Law by August 31st 2020. Failure to complete the program by the deadline will mean that your player(s) will be ineligible to skate.

Please print form and fill out, don't forget to sign and date it. Email registration form and payment information to kmharegistration@outlook.com or mail to: Director of Registration, P.O.Box 174, Kincardine, ON, N2Z 2Y7 to be received no later than August 1, 2020. Visit the website for more information or Email: kmharegistration@outlook.com

Player Information: Male / Female

Surname _____ Name _____ Date of Birth _____ Age: _____

Parent/Guardian: _____ Phone #: _____ Email: _____

Street, Lot, Conc: _____ Town/Village: _____

Township: _____ Postal Code: _____

*First time registrants with KMHA are required to submit a birth certificate in order to register

Divisions: Please place the [x] in the correct category:

1. U7 First year	Born in 2014-2016	<input type="checkbox"/>		
2. U7 (initiation)	Born 2014-2016	<input type="checkbox"/>		
3. U8 (minor novice)	Born 2013	<input type="checkbox"/>		
4. U9 (major novice)	Born 2012	<input type="checkbox"/>		
5. U11 (Atom)	Born 2010-2011	<input type="checkbox"/>	<input type="checkbox"/> GIRLS	If there is no girls hockey available in my daughters division, I would like her to play on a "BOYS" team YES NO
6. U13 (Peewee)	Born 2008-2009	<input type="checkbox"/>	<input type="checkbox"/> GIRLS	
7. U15 (Bantam)	Born 2006-2007	<input type="checkbox"/>	<input type="checkbox"/> GIRLS	
8. U18 (Midget)	Born 2004-2005	<input type="checkbox"/>	<input type="checkbox"/> GIRLS	

Parent / Guardian would like to volunteer as: Coach ___ Manager ___ Trainer ___ Other ___

NOTE: Any player who has not submitted a registration form or paid the registration fee will not be permitted on the ice. The only exception to the foregoing will be by approval of the KMHA Executive Committee after receiving a request for special consideration. This is a separate issue to the requirement for completion of the RISPEP and Rowan’s Law.

AGREEMENT: The undersigned parent(s) or guardian(s) agrees to abide by the terms set forth in the KMHA Code of Conduct (found at www.kincardineminorhockey.ca) governing the conditions under which applicants shall participate in Kincardine Minor Hockey.

It is advisable that every player be covered under the Ontario Hospital Insurance Plan. In case of injury, the player and parent(s) herewith waives all claims of any kind against Kincardine Minor Hockey in regards to injuries incurred by said player while playing, practicing, or travelling to and from out-of-town games. This consent recognizes that all reasonable precautions will be taken to prevent accidents or injuries. Permission is given to allow supervisors to seek emergency medical treatment.

PHOTO RELEASE: I authorize the use of any photo taken while participating in the above program YES NO

SIGNATURE OF PARENT (S) OR GUARDIAN (S)

Print Sign Date

Credit Card Payment Authorization:

Name on card: _____

Billing address: _____

Email (for receipt): _____

Credit card # _____

EXP MM/YY: _____

CVC: _____

Please note that unless requested, a receipt will not be given. Should you require a receipt, please provide your email and one will be sent once payment is processed.