



STEEL CITY HOCKEY REGISTRATION WAIVER FORM

Dan Caco 905-578-1738

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Website: www.steelcityhockey.com

NAME: _____

ADDRESS: _____

PHONE: () - _____ CELL: () - _____

E-MAIL: _____

D. O. B. (DAY/MTH/YR) _____ TEAM NAME: _____

Cheques are payable to: Steel City Hockey

Mail to: Steel City Hockey

3288 Highway 56

Binbrook, Ontario

LOR 1C0

GST#87206 9737 RT0001

All returned cheques are subject to a \$25.00 service charge.

A \$50.00 administration fee will apply to any request seeking full or partial refund.

I hereby understand and agree that participation in all activities of 1315691 Ontario Ltd. o/a Steel City Hockey

Development Programs and assume all risks and hazards incidental to such participation including medical and dental expenses and do waive, release, absolve, indemnify and agree to hold harmless the company of 1315691 Ontario Ltd. o/a Steel City Hockey Development Programs and or its employees and volunteers. I certify that the applicant is in good physical mental health and is able to participate in the physical activity of a vigorous activity. I also agree to maintain an exemplary code of conduct. Failure to carrying out this code of conduct will result in the expulsion of the player from 1315691 Ontario Ltd. o/a Steel City Hockey Leagues and no refund or registration fees will be available.

I acknowledge that I have read and understand the conditions of this application and agree to the conditions.

Signature: _____ Dated: _____

<http://www.steelcityhockey.com/pdfs/STEEL%20CITY%20%20WAIVER%20FORM.pdf>

