



2019 - 2020 REGISTRATION FORM

PLAYER LAST NAME: PL		PLAYER FI	PLAYER FIRST NAME:			PLAYER DATE OF BIRTH				
						YEAR	MONTH		DAY	
AAAHING ADDDESS				CITY/TOWNSLIE			DOCTAL CO	205		
MAILING ADDRESS:			CITY/TOWNSHIP:			POSTAL CODE:				
			T			EMAIL ADDRESS				
PARENT(S) OR GUARDIAN(S) FULL NAME			PHONE #			EMAIL ADDRESS				
1: PARENT:										
2. PARENT:										
3. OR GUARDIAN:										
			<u> </u>	Registration received after June 25, 2019 (late fee in effect)				ffect)		
Registration and payment received on or before June 25, 201			9	*****Unless discussed with Treasurer					<u>jject</u> j	
Little Sens Learn to Play (Born 2	011-2015) TBD			Little Sens Learn to Play				TBD)	
*1st Time Players Only		¢250.00		*1st Time Players Only		2012 2014\		\$300.00		
Initiation Registration (Born 2013-2014) Novice Registration (Born 2011-2012)		\$250.00 \$570.00		Initiation Registration (Born 20 Novice Registration (Born 201				\$620.00		
Atom Registration (Born 2009-2010)		\$570.00		Atom Registration (•		\$620.00			
Peewee Registration (Born 2007-2008)		\$570.00		Peewee Registratio)	-	0.00		
Bantam Registration (Born 2005-2006)		\$600.00		Bantam Registration (Born 2005-20			- I			
		\$600.00	Midget Registration (Born 2004						0.00	
**** For the 2019-2020 season, all registration fees, excluding Little Sens and Initiation include a team parent fee of \$100. This fee will be given to each team to aid in team start-up expenses. ****										
parent fee of \$100	. This fee will	be given	i to ea	ch team to aid i	n tear	n start-u	p expens	es.	***	
DIFACE DEAD DAMIA DECICEDATION DOLLOY ON THE DEVENCE CIDE										
PLEASE READ PMHA REGISTRATION POLICY ON THE REVERSE SIDE. I, the undersigned, as a parent or guardian of the above registered player hereby agree to abide by the conduct, codes, rules and decisions of										
the Hockey Canada, Ontario Hoc	-	_	•							
release and agree to indemnify a										
Commission thereof from all claim										
activity, which I, or any person c this activity. I understand that b										
executive member, team official				· ·	_			_		
from these actions including sus										
Refund Policy.										
SIGNATURE (ONLY ONE REQUIRED)			PRINT NAME:			DATE:				
The Northern Ontario Hockey Association (NOHA), in collaboration with the Ontario Hockey Federation										
(OHF) and its Minor Member Partners (Alliance Hockey, GTHL and OMHA) is proud to announce the										
Respect in Sport Parent Program. All new registrations must complete the parent program at										
nohaparent.respectgroupinc.com/										
Have you or the other parent/guardian completed the Respect In Sport Parent program?										
	CASH				Note	s:				
PMHA Use Only		#		\$						
D	CHEQUE (S)	#		\$						
Payment Method										
	EMT TRANSFER									

Powassan Minor Hockey Association - 2019-2020 Registration

All registrations must meet the following requirements before they will be processed:

- Registration Forms that have not been fully completed and/or signed will be returned as unprocessed to the applicant.
- Registrations will be returned if outstanding balances for any reason from previous years have not been resolved.
- Registration Payment(s) in full or post-dated cheques as stated below must accompany the registration form. Registration Forms without full
 payment attached will be returned to the family. To receive the early bird fee the entire payment must be received by June 25th, 2019
 - o Payment may be paid in full or by EMT Transfer:
 - Or make arrangements with Heather Rueck at treasurer@powassanhawks.com
 - If using financial assistance, we must receive payment before your player will be allowed to step on the ice. Apply early!
 - For insurance reasons players must be registered with full payment to the PMHA in order to participate in any PMHA activity including conditioning ice and tryouts.
- Please return the registration package as quickly as possible to Powassan Minor Hockey:
 - o At the PMHA REGISTRATION BBQ Tuesday, June 25th from 5:30 7:00
 - o **OR** by mail to: Powassan Minor Hockey Association P.O. Box 141, Powassan, ON POH 1ZO.
 - o **OR** by email transfer to <u>treasurer@powassanhawks.com</u>

Refund Policy:

All refund requests must be made in writing to the Registrar: registrar@powassanhawks.com and treasurer@powassanhawks.com

Dates	Refund Amount					
August 1 – September 30	Full Refund					
October 1 – October 31st	80% of registration fee paid (Not including Parent Fee)					
November 1 – January 1st	33% of registration fee paid (Not including Parent Fee)					
January 1 until end of season	NO REFUND					

Volunteer Time:

- Every parent or designate for your child will need to be available to volunteer during the weekend of January 17th, 18th, & 19th, 2020 for
 approximately 4 hours per child for the PMHA family hockey tournament. This is PMHA's main fundraiser and assists in keeping our
 registration rates low. If you are unable to fulfill those volunteer hours a charge of \$250.00 will be added to the following seasons
 registration costs to compensate.
- Every team is responsible for providing 2 volunteers to run 50/50 at a minimum of 3 Powassan Voodoo games throughout the season.
- Players playing hockey at the Novice level and up, will be required to volunteer some time to either the Keith Barton Memorial House Tournament or the Keith Barton Memorial Rep Tournaments.
- Remember.....hockey doesn't just happen; it takes a lot of work and effort from volunteers and parents on the team. Get involved in your child's team by washing jersey's, carrying the jersey bag, time keeping, attending PMHA meetings, 50/50 draws, etc. PLEASE SHARE THE WORKLOAD!

Financial Assistance:

- Kidsport http://www.kidsportcanada.ca/ontario/north-bay/
- Avery Seca Foundation http://averysecayouthinsports.com/
- Jumpstart http://jumpstart.canadiantire.ca/en/?gclid=CO7qtMi5-ssCFZNZhgodj3YL3g

To view PMHA's player release policy, please visit our website www.powassanhawks.com