

**TYKES AND JUNIORS FLOOR HOCKEY
Registration Form
Contact 727-0470 to register**

DEADLINE TO REGISTER; September 10th, 2010
9:30am to 10:30am Tykes – JK, SK- Grade 1 - _____
(must be currently enrolled and attending JK)
10:30am to 11:30 Junior – Grade 2, 3, 4 - _____

**Cost: \$50.00 – 10 week program – includes t-shirt –
Child’s t-shirt size = _____**

Child's Name: _____ Birthdate _____ Age: _____

Full mail Address _____

Home Phone: _____ Alternate Emergency Phone Number: _____ /cell: _____

Email address: _____

Parent's/Guardian's name: _____

**DOES YOUR CHILD HAVE ANY ALLERGIES (FOOD RELATED OR ENVIRONMENTAL
AND/OR MEDICAL CONCERNS/NEEDS/MEDICATION: yes _____ none _____**

(Impairment/Disabilities): yes: _____ none: _____

**Ontario Health Insurance card # _____ (for injuries/sickness requiring
emergency response, 911 will be called immediately and parent notified immediately)
For non-emergency injuries/sickness, parents will be notified by phone by Supervisor
in charge.**

**PEANUT ALERT!!- No peanut products please-we are asking that no peanut products
be brought to the program in snacks.**

**Children participating in this program must be supervised by a parent/guardian during
their scheduled activity.**

**MANDATORY – FULL FACE AND HEAD GEAR (Hockey helmet)
FOR ALL PARTICIPANTS**

It is also understood that reasonable safety precautions will be taken during the activity by the
facilitators voluntarily assisting in the activity.

I am also aware that there are always risks associated with any physical activities resulting
from my child participating in the program. Having knowledge of these risks and in being
allowed to participate in the program, I hereby assume all risk of injury, damage and liability
arising from such activities or use of any equipment and hereby release the Town of
Lakeshore, its officials, employees and agents and waive any right of recovery I might have to
bring a claim or lawsuit against them for any personal injury, death or other consequence
occurring to my child/children as a result of their voluntary participation in the activities
registered for. _____ Please make cheques payable to the Town of Lakeshore.

Date: _____

Signature of Parent/Guardian
