

Hounsfield Heights- Briar Hill 2010 Soccer Registration

(One form per child please)

Gender: M or F (Circle one)

2005 - 2006.....U5 -\$40
2004 -U6 -\$60
2002 - 2003U8 -\$60
2000 - 2001 .. U10 -\$60
1998 - 1999 .. U12 -\$60
1996 - 1997 .. U14 -\$70
1994 - 1995 .. U16 -\$70

Age Division: _____

Child's name: _____ Date of birth: _____

Contact /Address Information

Street: _____

City: _____ Province: _____ Postal Code _____

Parent/ Guardian: _____ E-mail address: _____

Home phone #: _____ Work phone #: _____ Cell #: _____

Other Emergency Contact: _____ Phone #: _____

Any information or concerns you'd like us to know

Bring completed form to registration night on February 23 at the community hall or mail form to:

2010 SOCCER REGISTRATION
2111 12th Ave NW, Calgary, AB, T2N 1K1

Fees:

- Registration Night at the Community Gym 7:00 to 8:30 pm. (Complete registration form beforehand)
Deadline for Registration: March 1, 2010,
- \$20 late fee may apply to registrations accepted after March 1, 2010.
- Fees do not include community membership; please bring a separate cheque of \$20.00 per family for 2010. Download the membership form from the address below and make the cheque payable to HH-BH Community Association.

PARENT/ GUARDIAN CONSENT AND RELEASE

I, _____ do hereby give my full permission for my child,

_____ to participate in the above sport activity program conducted by the Hounsfield Heights-Briar Hill Community Association. I recognize the risk of loss or injury

arising thereby, and agree and state that we allow such activity and consent to same at our sole risk. In consideration of allowing our participation in this recreational activity organized by or on behalf of Hounsfield Heights-Briar Hill Community Association, on behalf of our child and our own behalf, we specifically release and hold harmless the Hounsfield Heights- Briar Hill Community Association, its agents, servants, directors and volunteers from all loss, damage or injury resulting from or in connection with such participation, except arising from their own gross neglect or default.

IN THE EVENT OF INJURY or any other emergency, I authorize HH-BH Community Association or any of its agents to secure such medical advice and services, as HH-BH Community Association or its agents may deem necessary for the health or safety of my child. I ACCEPT RESPONSIBILITY for all such action taken on my child's behalf, including financial responsibility in excess of benefits, provided for my child in any medical plan.

DATE: _____

SIGNATURE OF PARENT/GUARDIAN

Privacy Policy

Privacy Consent: By providing the personal information on this form, you are consenting to HH-BH Community Association's collection and use of that information for the purposes of providing programs sponsored by the community. We may retain this information until December 31, 2011.

Date

Signature

In order to have a successful season we need coaches, coordinators and volunteers. If you are available, please fill in the following information:

_____ **Coach** _____ **Coordinator** _____ **Volunteer**

Level _____ **Name:** _____ **Phone #:** _____

Other: _____

Copies of this form and community membership forms can be printed from the community web site.
[:http://www.calgaryarea.com/nw/briarhill/communitynews/membershipinfo.htm](http://www.calgaryarea.com/nw/briarhill/communitynews/membershipinfo.htm)

Office Use:

Program Code: OUTSOC-YTH-10

Program fee: \$ _____

Cheque# _____ **or sibling that payment is registered under** _____

Community Membership Number: _____