VMHA 2022/2023 REGISTRATION INFORMATION

IF THIS IS YOUR CHILD'S FIRST YEAR TO REGISTER WITH VMHA, A COPY OF YOUR CHILD'S BIRTH CERTIFICATE AND YOUR PHYSICAL ADDRESS (STREET/COUNTY ADDRESS AND LEGAL LAND DESCRIPTION) IS REQUIRED.

REGISTRATION FEES:

DIVISION		YEAR BORN	<u>FEE</u>	INSTALLMENTS
U7		2016-2019	\$250	4 x \$62.50
U9		2014-2015	\$500	4 x \$125.00
U11		2012-2013	\$600	4 x \$150.00
U13	(M & F)	2010-2011	\$650	4 x \$162.50
U15	(M & F)	2008-2009	\$700	4 x \$175.00
U18	(M & F)	2005-2007	\$750	4 x \$187.50

\$100 EARLY REGISTRATION DISCOUNT

All second year U13 players must submit a \$100 deposit for referee clinic.

YOU MUST FILL OUT A PERSONAL INFORMATION DISCLOSURE FORM AND RETURN IT WITH THE REGISTRATION FORM.

PAYMENT:

- Payment can be made in full OR with post-dated cheques at time of registration. Post-dated cheques would be as follows:
 - 1st installment dated September 1, 2022 (1/4 of registration fee)
 - 2nd installment dated October 1, 2022 (1/4 of registration fee)
 - 3rd installment dated November 1, 2022 (1/4 of registration fee)
 - 4th installment dated December 1, 2022 (¼ of registration fee)
- e-transfers can be sent to <u>vikingminorhockey@yahoo.com</u> (e-transfers are set to auto deposit)
- Total registration fees must be paid in full as of **July 2022** (includes post-dated cheques)

A CHILD WILL NOT BE PERMITTED TO SKATE AND WILL NOT BE ASSIGNED TO A TEAM UNTIL ALL FEES ARE PAID.

REFUNDS:

- Refunds prior to December 31, 2022 will be given on a prorated basis.
- No refunds will be given after December 31, 2022.

ALL DISHONORED CHEQUES WILL BE SUBJECT TO A \$25.00 SERVICE CHARGE

VMHA 2022/2023 SEASON

PERSONAL INFORMATION DISCLOSURE FORM

I authorize Viking Minor Hockey Association to collect and use personal information and photographs for administration purposes only. These information/photographs may also be used for publicity and/or media relations in regards to Team Activities, League, and Tournament Play.

I give consent to Viking Minor Hockey Association to video tape, take photographs, or digital recordings of games that my child may be playing in and to use these in any and all media, including the VMHA website.

PLAYER'S NAME:		
PARENTS/GUARDIANS:		_
PARENT/GUARDIAN #1 SIGNATURE: _	DATE:	
PARENT/GUARDIAN #2 SIGNATURE:	DATE:	

The information that you provide to VMHA will be used for administration purposes only. Your personal information is protected by the Alberta Freedom of Information and Protection of Privacy Act (FOIP) and can be reviewed by you upon request. Please contact the Viking Minor Hockey Association if you have any questions about the collection or use of this information.

2022-2023 VIKING MINOR HOCKEY ASSOCIATION

HOCKEY CANADA FAIR PLAY CODE OF PARENTS

- I will not force my child to participate in hockey.
- I will remember that my child plays hockey for his or her enjoyment...not mine.
- I will encourage my child to play by the rules and to resolve conflict without resorting to hostility or violence.
- I will teach my child that doing one's best is as important as winning so that my child will never feel defeated by the outcome of the game.
- I will make my child feel like a winner every time by offering praise for competing fairly, trying hard, and doing their best.
- I will never ridicule, swear at, criticize, or intimidate my child or any child, a game official, a team official, or another parent.
- I will remember that children learn by example. I will applaud good plays and performances by both my child's team and their opponents.
- I will never question the game official's judgment or honesty in public. I recognize officials are being developed in the same manner as players.
- I will support all efforts to remove verbal and physical abuse from children's hockey games.
- I will respect and show appreciation for the volunteers who give their time to hockey for my child.

I agree to abide by the principles of this CODE as set and supported by this Association.

I also agree to abide by the rules, regulations, and decisions as set for this Association.

PLAYER'S NAME:		
PARENTS(S) NAME:		DATE:
SIGNATURES:		
PARENT #1	_ PARENT #2	