



2018-2019 Peace Country Ringette

\$280 Registration Fee

One regular practice per week. Additional practices/games may be scheduled.

Fee Due Dates:

Fees can be paid in full or installments (youth only)

\$180

Due by September 15, 2018

\$100

Post Date cheque for November 17, 2018

All players must have full equipment. Players without proper equipment will not be permitted on the ice. Hockey equipment will be accept for the first year, but must have ringette certified facemask

Equipment List

Here is a list of player equipment to assist you:

- CSA Approved Helmet (able to mount a ringette cage)
- Ringette Certified Facemask
- BNQ approved neck protector (prefer with bib)
- Elbow Pads
- Shoulder Pads
- Ringette/Hockey Gloves
- Ringette Girdle (optional for this year)
- Shin Guards
- Hockey Skates (no toe picks)
- Practice Jersey
- Ringette Pants (optional for this year)
- Certified Ringette Stick (we have loaner sticks for both age groups)

Program Contact Info

info@peacecountryringette.com

Peace Country Ringette – 2017-2018 Player Registration Form

Player's Name:		Date of Birth (DD/Mon/Year):
Address	Town/County:	Postal Code:
Primary Phone #:	Alberta Health Care #:	
Played Ringette/Hockey/ Figure Skate/ Skate ____# of years		
Mother/Guardian's Name:		Emergency Contact:
Primary Phone #:	Email:	Relationship to Player:
Father/Guardian's Name:		
Primary Phone #:	Email:	Phone number:

Extra Costs:

I am aware that registration fees **only cover Ringette Alberta fees and weekly practices**. I will be responsible for additional costs such as travelling to games and tournaments.

Initial here: _____

Waiver:

I hereby give consent for my child to participate in the Peace Country Ringette Program. I accept full responsibility for any injuries that the said player may receive.

I hereby give consent for my child, initial here: _____

Photo/Name Release:

In the course of Peace Country Ringette activities, pictures may be taken and articles may be written and submitted to the media, Ringette Alberta, and/or other organization for the purpose of promoting ringette. I, on behalf of my child _____ grant Peace Country Ringette permission to display or submit photos and articles which may include my said child's name for the purpose of promoting Peace Country Ringette activities.

I hereby give consent for my child, initial here: _____

Payment Information:

Fees are due before or on listed dates. Cash, Cheques, e-transfers are accepted. Cheques can be made out to Peace Country Ringette.

 Parent/Guardian Signature

 Date

Player Medical Information

Returning player and no changes to information, check here: _____

(Information not required if it remains the same)

Player's Name:	
Family Doctor/ Nurse Practitioner:	
Doctor's Phone number:	
Alberta Health Care Number:	
Relevant Medication:	Allergies:
Does child carry and know how to administer their own medications? (Circle one)	Yes or No
History of Previous Injuries:	
Other Conditions (Braces, contact lenses, glasses, etc):	