| APPLICATION FORM |
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| STUDENT NAME: (please print clearly) |
| |
| First Name |
| |
| Last Name |
| HOME ADDRESS: (full address including postal code) |
| |
| |
| |
| TELEPHONE: H: () C: () |
| |
| EMAIL: |
| D.O.B/// |
| MONTH DAY YEAR |
| CURRENT LEVEL: (Circle One) HL A AA |
| TEAM NAME: |
| |
| LUNCH PROGRAM: (Add \$45.00 for lunch program) |
| Purchase Lunch Will Bring Own Lunch |
| |
| FREE T-SHIRT: (indicate proper size) |
| YOUTH SIZES |
| ADULT SIZES |
| |
| AMOUNT PAID: (circle amounts applicable) |
| DEPOSIT \$175.00 FULL \$390.00 MEAL PLAN \$45.00 |
| |
| CREDIT CARD: Exp / |
| |
| NAME ON CARD: |
| |
| The participant and parent/guardian acknowledge and agree that the Humberview Huskies Hockey |
| Club and its directors, instructional staff, and representatives will not be held responsible for any accident, damago, injury or loss sustained in connection with the hockey training program and expressly release the allorementioned parties from all claims arising from any such occurrence, including refunds. In the event of an inability to be contacted, I give Humberview Huskies Hockey Club the permission to seek any necessary medical attention required. By signing below, I hereby agree and adhere to the above statement. |
| Name: (Parent/Guardian - Please Print Clearly) |
| |
| Signature: (Parent/Guardian) |

| Program Highlights |
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| Power Skating |
| * Maximize your stride * Edge control * Core balance techniques * Crossovers |
| Puck Skills |
| * Stick handling drills * Shooting techniques * Evasive moves to elude opponents * Acceleration moves * Improve hand & food speed |
| Goalie Coaching |
| * Under the direction and supervision of "Rick Heinz" * Former junior and college goalie instructors * Emphasis on fundamentals and mobility Registration Information |
| Registration - Payment Terms: If registering before May 1st - \$175.00 deposit required and \$215.00 post-dated cheque (dated for July 1st) Acceptance will be confirmed when registration, payment an waiver is signed and received If adding meal plan, please include with deposit Full payment due if registering after July 1st Payments can be made by Cheque, Cash, Visa, MC, Amer Discover Cards If paying by credit card please indicate amount, note balance outstanding will be taken automatically on July 1st |
| Cancellation Policy: No refunds past July 1st 2017 No refunds for injury or illness Cancellation prior to July 1st - fee will be 50% Customer will be charged an additional \$50.00 fee for NSF cheques |
| <i>Payment:</i> Please make cheques payable to: "Humberview Huskies" |
| Send to: Don Bamford 2862 Weston Road Toronto, ON M9M 2S3 or Email: <u>don-bamford@hotmail.com</u> |



