



Registration Form 2011 - 2012

Player's Name: _____ Division: _____

Date of Birth: _____ / _____ / _____ Age (as of Dec 2010) _____
Year Month Day

MCP#: _____ Gender: M _____ F _____

Address: _____

Postal Code: _____ Telephone #: _____

Mother's Address Same as Above Father's Address Same as Above

Mother's Name _____ Father's Name _____

Mother's Cell #: _____ Father's Cell#: _____

Email Address: _____ Email Address _____

Medical Condition(s): _____

Primary Emergency Contact: _____

Other Players in Family playing in DLMH system: Name: _____ Division: _____

Name:

Division:

Payment received by: _____

Parent / Guardian Signature: _____

Date: _____

Registration Fees

| | | | |
|--------|-----------------------|----------|--|
| Notes: | 1 st Child | \$355.00 | |
| | 2 nd Child | \$305.00 | |
| | 3 rd Child | \$255.00 | |
| | All Star Tryout Fee | \$25.00 | |
| | All Star Fee | \$200.00 | |

| | | | |
|------|--------------------------|--------------|--------------|
| | 2 nd Division | \$150.00 | |
| | | Total | |
| Date | Receipt | Amount Paid | Amount Owing |
| | | | |
| | | | |
| | | | |

(*Fees for first year registrants - \$205.00)