



# PICKERING/AJAX CHURCH FUN HOCKEY LEAGUE 2009-2010

## Monday Night Player Registration Form

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Male  Female

Address \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Parents Names: \_\_\_\_\_

Phone #(s): \_\_\_\_\_

Jersey Size:     Kids Medium             Kids Large             Kids XL  
                     Adult Small             Adult Medium         Adult Large

Highest Level Played: \_\_\_\_\_

Health Card #: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone#: \_\_\_\_\_

**Please note:** *SU Sportz is not responsible for any injuries that may occur. However, if one does occur, I/we give approval for SU Sportz to obtain first aid for my child as soon as possible.*

\_\_\_\_\_  
Signature-Parent or Guardian

Scripture Union and SU Sportz use customer information from registration forms to send information about our organization and promotional material from some of our partners. Financial information that is collected is only to bill for donations, products and services. The customer's information is also used to make contact for customer service reasons. Customers may opt out of receiving future mailings

## What about you? Do you want to help?

Yes, I would be willing to help out as:

Coach             Asst. Coach             Score Keeper             Team Sponsor

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

## Fees and Payment Information

**\$275 (includes GST). Fee subject to change.**

*We accept cheques or Visa/MC*

**Cheques:** PLEASE MAKE CHEQUES PAYABLE TO "SU Sportz" AND REMIT TO:  
SU Sportz, 1885 Clements Road, Unit 226, Pickering, ON L1W 3V4

**Credit cards (Visa and MC):** PLEASE COMPLETE INFORMATION BELOW:

CC#: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Signature: \_\_\_\_\_