



AJAX/PICKERING CHURCH FUN HOCKEY LEAGUE 2009-2010

Saturday Afternoon Player Registration Form

Name: _____ Birthdate: DD / MM / YYYY Male Female

Address _____ City: _____ P.C.: _____

Email (PLEASE print clearly): _____

Phone #s: _____ Health Card #: _____

Parent/Guardian Name(s): _____

Highest Level Played: _____

Emergency Contact & Relationship to player: _____ 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

\$375 (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: _____