



# Mini Cassia Inline Hockey Association

www.minicassiainlinehockey.com

Inline Roller Hockey Registration

Ages 4-18

\$35 Registration Fee

Name of Player \_\_\_\_\_

Date of Birth (M/D/Y) \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Home Phone# \_\_\_\_\_ Cell Phone# \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Email Address \_\_\_\_\_

In Case of Emergency Contact:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Child's Physician \_\_\_\_\_ Dr.'s Phone # \_\_\_\_\_

I give permission for the Hockey Association to use photographs of my child for advertising purposes

I do Not give permission for the Hockey Association to use photographs of my child for advertising purposes

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

If Returning Player, Please list name of Previous Coach & Division (Squirt, PeeWee, Bantam, Midget)

Coach \_\_\_\_\_ Division \_\_\_\_\_

FIRST YEAR PLAYER.

**Please Circle your T-Shirt Size: Youth: Small Medium Large Adult: Small Medium Large XLarge XXL**

Questions & Sponsorship Information: Call/Text Siobhan @ 208.650.8559

\*Mini Cassia Inline Hockey Association is a Non-Profit Organization\*

### Mini Cassia Inline Hockey Association **RELEASE OF LIABILITY:**

I understand that, although safety will be a priority, parts of the inline hockey program will be physically challenging. I recognize therefore the risk of injury from participating in this program, and I hereby voluntarily assume that risk. I do further release and hold harmless the City of Heyburn, Mini Cassia Inline Hockey Association, and all those associated with Mini Cassia Inline Hockey Association from all liability for any injury incurred by me in the event of such injury as against the Mini Cassia Inline Hockey Association.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

(Parent or guardian if under 19 years of age)