



**TRI CITIES  
PREDATORS  
FEMALE ICE HOCKEY ASSOCIATION**



918-1926 Como Lake Ave., Coq., BC, V3J 7X8 (604) 464-7733 (464-PRED) Fax (604) 941-3720 www.tcpreds.com

## Registration for 2009-2010 Season

Player Name: \_\_\_\_\_ Division: \_\_\_\_\_

Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

City: \_\_\_\_\_ PC \_\_\_\_\_ BC Medical #: \_\_\_\_\_

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

Email: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

(for Association Correspondence)

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

(Same) Address: \_\_\_\_\_ (Same) Address: \_\_\_\_\_

(Same) Email: \_\_\_\_\_ PC \_\_\_\_\_ (Same) Email \_\_\_\_\_ PC \_\_\_\_\_

(Same) Telephone \_\_\_\_\_ (Same) Telephone \_\_\_\_\_

Returning Player  Out of District  Player Movement

Are you willing to volunteer for: Coach  Assist Coach  Manager  Safety  Fundraising

How did you hear about TCFIHA  Friend  Newspaper  Website  Brochure  Other \_\_\_\_\_

Have you ever played for another Hockey Association? Yes  No  Association: \_\_\_\_\_ Yr \_\_\_\_\_

### SIGNATURE AND WAIVER

We hereby acknowledge the authority of Hockey Canada, BC Amateur Hockey Association, Pacific Coast Amateur Hockey Association, and Tri Cities Female Ice Hockey Association and agree to carry out and abide by the Constitution, By-Laws, Rules and Regulations of those associations.

EQUIPMENT: We, at the end of the season covered by this registration, agree to return all equipment provided by the Tri Cities Female Ice Hockey Association, in good condition, and should we fail to do so we agree to reimburse the Association for the replacement cost of such equipment.

RELEASE: In consideration of this application to play under the auspices of Tri Cities Female Ice Hockey Association, I do hereby for myself, heirs, executors, administrators and assigns, remise, release, and forever discharge the HCA, BCAHA, PCAHA and TCFIHA, its officers, or anyone acting on their behalf from all manner of litigation, damage claims, or demands in law or equity which I may have or acquire by reason of personal injury, loss or damage to property, which may occur during or by reason of participation in the activities of the association.

Signature of parent or guardian or player older than 19 years **x** \_\_\_\_\_

Dated the \_\_\_\_\_ day of \_\_\_\_\_ 2009

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## Tri Cities Female Ice Hockey Association Registration Receipt 2009/10 Season

**Minimum non-refundable fee of \$50.00 due at time of registration**, balance of fees may be made in installments with complete fees due by September 1st. Failure to have fees paid by September 1st may result in suspension of player.

All NSF Cheques are subject to a charge of \$30.00.

Tri Cities Female Ice Hockey Association's refund policy allows for refunds up to December 31<sup>st</sup> as defined in the registration guidelines ([www.tcpreds.com/newpreds/reg\\_temp.htm](http://www.tcpreds.com/newpreds/reg_temp.htm)) less the \$50.00 non-refundable administration and insurance fees. After December 31<sup>st</sup>, withdrawal from the Association due to medical issues will be reviewed by the Association Executive on a case by case basis. Refund amount, if applicable will be applied to the next season's fees.

**TCFIHA REGISTRATION SCHEDULE 2009/2010**

<input type="checkbox"/> Juvenile (18-20)	\$300	<input type="checkbox"/> Atom (9-10)	\$300		
<input type="checkbox"/> Midget (15-17)	\$500	<input type="checkbox"/> Novice (7-8)	\$225	Position: <b>F D G</b>	Please Circle Preference
<input type="checkbox"/> Bantam (13-14)	\$500	<input type="checkbox"/> Tyke (5-6)	\$150		
<input type="checkbox"/> Peewee (11-12)	\$475				Registration Fee: <input style="width: 50px;" type="text"/>
<input type="checkbox"/> Coquitlam KidSport™	Coquitlam KidSport™ makes grants to assist with registration fees for individual athletes (children 6 to 18 years of age) whose opportunities are limited by financial restrictions. TCFIHA encourages you to please consider a donation of \$2-\$25, through your registration. Amounts over \$25 are tax deductible and should be sent directly to KidSport™ call 604-933-6084				<input style="width: 50px;" type="text"/>
<input type="checkbox"/> Conditioning Camp	Optional			Tyke/Novice/Atom	\$35 <input style="width: 50px;" type="text"/>
				Peewee/Bantam/Midget	\$50 <input style="width: 50px;" type="text"/>
<b>Rep Team Try-Outs</b>	Optional: <b>Peewee/Bantam/Midget</b> Players wishing to try out for Tier 1 team.				
<input type="checkbox"/> Player Must declare position before tryouts		<b>Forward</b>	<b>Defense</b>		\$60 <input style="width: 50px;" type="text"/>
<input type="checkbox"/> Goalie	Players declared as goalies will not be considered for other positions in try-outs				\$30 <input style="width: 50px;" type="text"/>
<input type="checkbox"/> Fundraising Fee	Pay \$40 <input type="checkbox"/>	<b>OR</b>	sell a box of chocolates <input type="checkbox"/>	<b>Must Specify</b>	\$40 <input style="width: 50px;" type="text"/>
<input type="checkbox"/> Player Movement Fee	If played with a Hockey Canada sanctioned minor assoc. in the past other than TCFIHA.				\$10 <input style="width: 50px;" type="text"/>
<input type="checkbox"/> Late Registration Fee	<b>Applies after June 14<sup>th</sup> 2009</b>				\$50 <input style="width: 50px;" type="text"/>
<b>Discounts (If applicable)</b>					
<input type="checkbox"/> Goalie Discount	Full time goalie MUST have all own equipment. (50% off division fee)				50% off <input style="width: 50px;" type="text"/>
<input type="checkbox"/> 3 <sup>rd</sup> Child Discount	Applies to youngest child's fees or the lowest of the 3				50% off <input style="width: 50px;" type="text"/>
<input type="checkbox"/> AGM Discount	Must attend AGM to receive this discount				\$25 off <input style="width: 50px;" type="text"/>
<input type="checkbox"/> New Player Discount	Incentive for new players Atom and up who have never played before.				\$50 off <input style="width: 50px;" type="text"/>
<b>Jersey deposit \$100 – all players post date a cheque for April 1 2010.</b>					<input style="width: 50px;" type="text"/>
<b>TOTAL PAYMENT DUE</b>					<input style="width: 50px;" type="text"/>
<p><b>ALL NEW PLAYERS</b> Must provide a copy of their birth certificate and a copy of proof of residence (hydro or gas bill)</p>					
<p><b>All returning players MUST REGISTER with the association in order to ensure a spot on a team and go through try-outs</b></p>					

**FOR TCFIHA USE ONLY**

<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Proof of Residence	<input type="checkbox"/> BC Hockey No Team in Category Form	<input type="checkbox"/> BC Hockey Res. Move Form
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PLAYERS PAID FOR	FEES	PAYMENTS*	CHEQUE #	AMOUNT	
<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	June 1	<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	Min \$50 NON-REFUND. DEPOSIT
<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	July 1	<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	
<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	Aug 1	<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	
<b>TOTAL FEES</b>	\$ <input style="width: 80px;" type="text"/>	Sept 1	<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	
			<b>CASH</b>	\$ <input style="width: 80px;" type="text"/>	
	Jersey Deposit April 1 2010		<input style="width: 150px;" type="text"/>	\$ <b>100</b>	
	Coquitlam KidSport™		<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	

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	Coquitlam KidSport™		<input style="width: 150px;" type="text"/>	\$ <input style="width: 80px;" type="text"/>	

\*When paying on Payment Plan, please Post-Date Cheques June 1, July 1, Aug 1, and Sept 1