

September 5, 2017

Hello and Happy September!

I hope that everyone is happy to be back at school and back to a regular schedule! We had a beautiful summer! Just too short!

A reminder to please get your registrations in for Dryland Training with Shelley Johnson! This will run on Mondays from 5:45 – 6:30 pm for 6 Sessions. The cost is \$30. Per person. First session is Sept. 11. This is open to all youth born 1999-2006.

Jack McKinlay will once again run Power Skating / Skills for us. This will be held on Mondays from 3 - 8pm at the Sportex. **Registration deadline is Sept. 22.** Once registrations have been confirmed, the specific times and groups will be decided. The cost for Power Skating is \$100 for Hockey Registrants and \$125 for non-hockey players.

For the above two programs, payment is required *prior* to starting the programs. All cheques can be made out to Consort Minor Sports and can be dropped off at the Village office with your waivers and registration forms.

A note to any NEW Hockey registrants: *If your child has never played hockey here before, there will be no late fees charged.* Please have your registration and payment in **prior to September 15.** If your child has been registered before, the deadline to register was June 15 and payment was due Sept. 1. For registration questions please call the Village office @ 403-575-3623. For hockey registration payment inquiries, please call Barry Brigley @ 403-578-3679.

Have a great Fall Season!

*Consort Recreation Office*



## Village of Consort Recreation Program Registration Form

Name:	_____	Male / Female
Date of Birth:	_____	_____
	Month	Day
		Year
Mailing Address:	_____	
Legal Address:	_____	
Email:	_____	
Home Phone:	Cell Phone	Text (y / n)

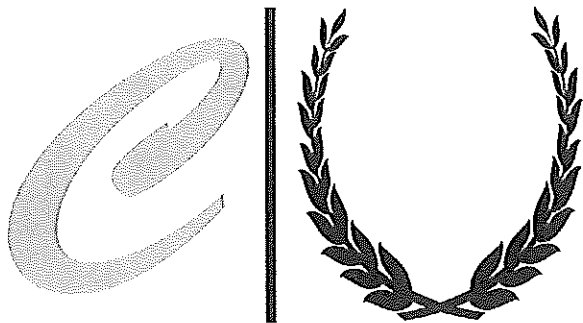
**Program Registering For:**

- Power Skating
- Dryland Training
- 3 on 3
- Minor Ball
- Minor Soccer

Cost: \_\_\_\_\_

Payment Received: \_\_\_\_\_

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



## Village of Consort Acceptance of Risk / Image Waiver Form

This document will affect your legal rights and liabilities. Please read carefully and sign before participating in any Recreation Programs with the Village of Consort.

We acknowledge that recreation programs involve some risk and there is the potential to get injured while playing or participating in any sport. We are participating at our own risk and in full knowledge that there is a risk involved. In consideration of being allowed to participate, we hereby assume all risks and release/absolve the Village of Consort and the organizers, employees and instructors from all liability or claims of any nature which may arise from our participation in this activity. We will be responsible for our own equipment and at no time hold anyone responsible for damage or theft of this equipment.

We hereby declare that in signing this document that we have read, understand and agree to the terms and conditions stated herein and that it is binding upon our executors and heirs.

I acknowledge that I have read, understand and agree to the terms and conditions stated herein.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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

**IF UNDER 18:**

I acknowledge as the parent/guardian of \_\_\_\_\_ that I have read, understand and agree to the terms and conditions stated herein and allow my child to participate in this activity.

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

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

*I understand that by marking this box I am giving permission for Village of Consort to use my image in the Village's advertising campaigns, publications, or be posted to the website. At no time will personal information be used without further written consent.*

Witness Sign: \_\_\_\_\_

Witness Print: \_\_\_\_\_



# 3C's MHA Registration Form

Player's Name: \_\_\_\_\_ M / F \_\_\_\_\_

Level \_\_\_\_\_ Town \_\_\_\_\_

Birth Date: \_\_\_\_\_ Age as of Dec. 31st: \_\_\_\_\_

Has your Child played hockey before? \_\_\_\_\_ What Level? \_\_\_\_\_

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

Mailing Address: \_\_\_\_\_  
Street Addr/ Legal Land Location: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Text #: \_\_\_\_\_

Mom's Cell: \_\_\_\_\_ Dad's Cell: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

### Emergency Contact

Name \_\_\_\_\_ Number \_\_\_\_\_

*I hereby authorize my child to participate in this Minor Hockey Activity and hereby release the 3 C's MHA, the Towns associated with the 3C's and any employees or volunteers of any legal liabilities.*

Printed Name of Parent/Guardian \_\_\_\_\_

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

Date \_\_\_\_\_

### Volunteer information \*\*\*All volunteers must have a Vulnerable Sector check done\*\*\*

I would like to assist the Team (s) in the following way:

Coach: \_\_\_\_\_ Other: \_\_\_\_\_

Assistant Coach: \_\_\_\_\_ Other: \_\_\_\_\_

Manager: \_\_\_\_\_

### For Office Use Only

Season: \_\_\_\_\_ Division: \_\_\_\_\_ Town: \_\_\_\_\_

Registration Fee: \_\_\_\_\_

Family Discount: \_\_\_\_\_

Other: \_\_\_\_\_

Total

Cash	Cheque	Date
_____	_____	_____



# 3C's Minor Hockey Association Waivers

I/we \_\_\_\_\_

the Town of: \_\_\_\_\_ County of: \_\_\_\_\_

In the Province of Alberta do hereby declare that I/we are the parent(s) or guardian(s) of the following:

\_\_\_\_\_  
\_\_\_\_\_

Give permission for the above named to travel to and from activities involved with the 3C's MHA.

Grant the 3C's MHA and it's representatives the permistion to use the above named individual(s) picture and/or name in relation to any activity or publication with regards to the 3C's MHA

Grant the 3C's MHA and it's representatives the right to take photographs of me, my property or the above named dependents in relation to any 3C's MHA activity, with or without my name, for any lawful purpose, including, for example, publicity, illustration, advertising and web content.

We will maintain our vehicle insurance at a minimum of \$1,000,000.00 to provide insurance protection against any claims brought by third parties for injury and/or damage arising out of the operation of my/our vehicle if using it during or for 3C's MHA activites

Signed and witnessed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

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

\_\_\_\_\_  
Witness Print

\_\_\_\_\_  
Witness Sign

Fees for **EARLY REGISTRATION** for the  
2017/18 Season

*Registration after June 15, 2017 will be charged an  
additional \$150.00*

<b>Division</b>	<b>Birth Year</b>	<b>Age</b>	<b>Cost</b>
Initiation	2011/12	5 & 6	\$220.00
Novice	2009/10	7 & 8	\$260.00
Atom	2007/08	9 & 10	\$355.00
Pee Wee	2005/06	11 & 12	\$445.00
Bantam	2003/04	13 & 14	\$485.00
Midget	2000/2001/2002	15/16/17	\$485.00

\* Payment must be made in full by September 1, 2017 or an  
additional \$150 will be applied  
Please make payment to:

**The 3C's MHA**  
**Box 428**  
**Coronation, AB T0C 1C0**