



REGISTRATION (2024/2025)

\$25/PARTICIPANT

TEAM NAME _____ LEAGUE NAME (if applicable) _____
 TEAM REP. _____ EMAIL _____
 ADDRESS _____ CITY _____ PROV _____ POSTAL CODE _____ PHONE _____

| | FIRST NAME | LAST NAME | EMAIL | PHONE # | DATE OF BIRTH MM / DD / YY |
|-----|------------|-----------|-------|---------|-------------------------------|
| 1. | | | | - - | / / |
| 2. | | | | - - | / / |
| 3. | | | | - - | / / |
| 4. | | | | - - | / / |
| 5. | | | | - - | / / |
| 6. | | | | - - | / / |
| 7. | | | | - - | / / |
| 8. | | | | - - | / / |
| 9. | | | | - - | / / |
| 10. | | | | - - | / / |
| 11. | | | | - - | / / |
| 12. | | | | - - | / / |
| 13. | | | | - - | / / |
| 14. | | | | - - | / / |
| 15. | | | | - - | / / |
| 16. | | | | - - | / / |
| 17. | | | | - - | / / |
| 18. | | | | - - | / / |
| 19. | | | | - - | / / |

PAYMENT METHOD:

VISA MC EXPIRY _____
 _____ MM / YY

Cheque/ Money Order enclosed (payable to CARHA Hockey)
 E-transfer to payments@carhahockey.ca (use "hockey" as password)

CARD# _____ CVC# _____ # OF PARTICIPANTS _____ x \$25 = \$ 0 _____
 (PLEASE PRINT) (AUTHORIZATION)
 CARD HOLDER _____ SIGNATURE _____

CERTIFICATE OF INSURANCE DO NOT add players/managers/timekeepers in this area. This area is for the arena/ municipality you play in only. Sponsors may be added as additional insured. Should you require further information, please contact CARHA Hockey.

Name additional insureds:

CARHA HOCKEY REGISTERED PLAYERS ACKNOWLEDGE THE RISK OF BEING INJURED WHILE PLAYING THE GAME OF HOCKEY. TEAM REP SIGNATURE: _____ DATE: _____

The Canadian Adult Recreational Hockey Association (CARHA Hockey) is committed to protecting the privacy and confidentiality of your personal information in our possession and complying with applicable privacy laws in Canada, including the Personal Information Protection and Electronic Documents Act. In furtherance of this commitment, CARHA Hockey has adopted a Privacy Policy and appointed a Chief Privacy Officer who is accountable for our compliance with applicable privacy laws and CARHA Hockey's Privacy Policy.

Please consider this notification of confirmation that the collection of personal information by CARHA Hockey is limited to that which is necessary for communications with you, membership registration organizing hockey tournaments as the official national body for recreational hockey in Canada, determining if our products and services, or those of our partners, meet your needs, offering and providing our products and services, or those of our partners, that may be of interest to you, collecting monies owing to CARHA Hockey or permitting CARHA Hockey to pursue available remedies or limit any damages it may sustain, complying with all applicable laws or for other purposes that are disclosed to you before or at the time the personal information is collected. Unless required by law, we will obtain your consent before using or disclosing your personal information for a purpose not previously identified.

A complete copy of CARHA Hockey's Privacy Policy and instructions for unsubscribing from our mailing lists and/or informing us of your preferences for the use and disclosure of your personal information can be found on our website at www.carhahockey.ca or obtained by writing to us at the address below.

For further information about CARHA Hockey's Privacy Policy, to address any concerns you have, to review or verify your personal information in our control or to find out how we have used it or to whom we have disclosed it, please email CARHA Hockey's Chief Privacy Officer - privacy@carhahockey.ca or contact us in writing at the address below.

MEMBERSHIP FEES ARE NON-REFUNDABLE BY REMITTING THIS REGISTRATION FORM TO CARHA HOCKEY, THE ABOVE NOTED TEAM IS COMMITTING TO REGISTER FOR THE SEASON

info@carhahockey.ca

carhahockey.ca



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