



Cambridge Minor Ball Hockey League 2010 Season



519.260.0682

E-mail: cambridgequestions@tricityballhockey.com
www.tricityballhockey.com

\$149.00 - includes jersey, shorts and socks

Divisions Offered:

Squirt 2004-05	Tyke 2002-03	Novice 2000-01	Atom 1998-99	Peewee 1996-97	Bantam 1994-95	Junior 1992-1993
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- Programs offered Friday, Saturday and Sunday's from April to the end of June •
 - 14 games including playoffs □ Two games per week with no practices •
 - Games played at Preston Memorial, Karl Homuth or Dickson Arena •
 - Awards, pizza and pop on Day of Champions (last day) •
 - OBHA Certified Referees □ Fun & safe □ Limited dental & medical insurance •

Mandatory equipment required:

CSA Approved Hockey helmet with full facial protection, hockey gloves, soccer shin pads and athletic cup
Soft elbow pads and soft knee pads are recommended

We offer 4 easy ways to register:

- 1) Online
- 2) By mail
- 3) By fax 519.260.0682 (credit card only)
- 4) In person at one of the following locations:

Registration Dates & Locations:

Dickson Arena
10:00 am – 1:00 pm
Saturday, February 6

Hespeler Arena
10:00 am – 1:00 pm
Saturday, February 20

Preston Memorial Arena
10:00 am – 1:00 pm
Saturday, February 27

(Do not delay as programs may fill up before the last registration date)

REGISTER ONLINE TODAY

www.tricityballhockey.com

A GAME ANYONE CAN PLAY!



PROUD MEMBERS OF



Ball Hockey is... A Game Anyone Can Play!

www.tricityballhockey.com



CAMBRIDGE MINOR BALL HOCKEY LEAGUE 2010 REGISTRATION FORM



128 Sofron Drive, Cambridge, Ontario, N3C 4M8
Tel: 519.260.0682 Fax: 519.260.0682
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Player Information:

- Squirt 2004-05
 Tyke 2002-03
 Novice 2000-01
 Atom 1998-99
 Peewee 1996-97
 Bantam 1994-95
 Junior 1992-93

Name: _____ Birth Date: (M)____ (D)____ (Yr)_____

Address: _____ City: _____ Postal Code: _____

Parent Information:

Parent's Name: _____ Parent's Name: _____

Home #: _____ Home #: _____

Cellular #: _____ Cellular #: _____

Email: _____ Email: _____

Questions, Volunteers & Sponsorship:

- Does your child play ice hockey?_____ if yes, which level AAA AA A Select House League
- My child is a: Player Goalie if goalie, what experience do they have? _____
- Did your child play ball hockey last year?_____ if yes, which team? _____
- Does your child have any friends/relatives they wish to play with? If yes, please list names below
NOTE: The executive will attempt to put your child with at least one friend.
_____ or _____ or _____
- Can you assist as? Head Coach Assistant Coach Division Convenor Sponsor

Registration Fee & Payment: \$149.00 (see savings below)

Family Plan
Save \$10 for every
child registered

LATE FEE
Add \$20 after March 15th

Sponsorship Plan \$350
Sponsor a team, your
child plays for free

Received \$ _____ By _____ Cash Cheque # _____ Payable to: Cambridge Ball Hockey League

Credit Card: Visa MC AMEX # _____ Exp: ____/____

Waiver:

In consideration of the Cambridge Minor Ball Hockey League (CMBHL) permitting the player to participate in any of the activities of the CMBHL, I, for myself, my family, heirs, successors, and executors hereby indemnify and hold harmless the CMBHL, it's directors, officers, successors, and assigns, from all costs, claims, actions, damages, or liabilities, whatever their nature or however caused, resulting from the participation of the player in any activities of the CMBHL.

Parent/Guardian Signature: _____

Notes:

CC Approval#:
