

**Registration Form for the 2019/2020 Season**

Player Name:

Team Trying out for:

Address:

Phone#:

Email:

Date of Birth:

Position:

Team Played For 2018/2019:

Tryout Fee = $50.00

We, the undersigned agree that hockey is a fast paced sport, which can involve risk of serious injury. We agree that we assume all responsibility for the above named player and that we will not hold Mt Forest Minor Hockey, or any of its directors, coaches, trainers or other staff responsible for any injury that may occur during the tryout sessions or subsequent practices/tournament game play.

Player Name Player Signature Date

Parent/Guardian Name Parent/Guardian Signature Date

Please email to: [girlstryouts@mtforestminorhockey.ca](mailto:girlstryouts@mtforestminorhockey.ca)