

HAMILTON DISTRICT SLEDGE HOCKEY 2020/2021 REGISTRATION FORM

Player Information			
Name			
Address			
Home Phone		Cell Phone	
Email			
Birth Date		Health Card #	
Guardian or Emergency Contact	Name	Email	Cell Phone
Medical Info			
Disability			
Medications			
Allergies			
2020 Registration Info			
Cohort, (check 1)		Early	Late
Payment	Method	Date	Amount
Team Equipment	Game Jerseys	Practice Jerseys	Sticks
Agreements			
(Player or guardian)	Print name	Signature	Date
I confirm that I have reviewed the Code of Conduct posted on the Hamilton Sledgehammers website and agree to conduct myself in accordance with the Code of Conduct.			
I confirm that I have reviewed the Concussion Code of Conduct and the Concussion Awareness Resources posted on the Hamilton Sledgehammers website and commit to compliance with that Code.			
I confirm that I have reviewed the Covid-19 Safety Plan posted on the Hamilton Sledgehammers website and agree to compliance including self-assessment before each session and staying home if unwell.			