## HAMILTON DISTRICT SLEDGE HOCKEY VOLUNTEER REGISTRATION FORM

Personal Information			
Name			
Address			
Home Phone		Cell Phone	
Email	-		
Health Card			
Birth Date			
Emergency	Name	Home Phone	Cell Phone
Contact			
Availability			
Placement	Team 1, (U15)	Team 2, (Open)	Team 3, (comp)
Role,	Push	Bench	Other
(Push/Bench)	Pusii	bench	Other
Time	Tuesday	Saturday	
Other			
Team Equipment Assigned			
Code of Conduct Date			
Police Check Date			
Signature			
Date			