

Goaltender		Import	
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2024-2025 PLAYER REGISTRATION CERTIFICATE

Surname Given Name Date of Birth: Year Month	Day			
Address City Province Postal Cod	е			
Telephone No.				
receptione 1vo.				
E-Mail:				
In aliaible to mlay for the				
Is eligible to play for the				
Resident at the above address since: Citizenship				
Day Month Year Canada USA				
Canada USA				
I last registered with the following Team(s)				
That registered with the following ream(s)				
YEAR: In the B	ranch/Province			
NEAD TOAM	1.70			
YEAR: In the E	ranch/Province			
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I, the undersigned certify the above information to be true and in consideration of the granting of this certificate to me with the privileg				
and by signing this certificate I have become subject to the rules, regulations and decisions of Hockey Canada, it's Board of Dire	ectors, its Branches			
and/or divisions which may be restrictive in some areas such as movement from team to team, conduct etc. and I agree to abide by sur and decisions of Hockey Canada, its Board of Directors, its Branches and/or divisions.	n rules, regulations			
The information above is collected for all registered participants and is required by Hockey Northwestern Ontario (it's employees, team officials, volunteers, leagues and associations) to facilitate its hockey programs and to administer the rules that govern sanctioned events. Hockey Northwestern Ontario				
treats this information with the utmost respect and in accordance with the Hockey Northwestern Ontario's Privacy Policy at all times. For further information				
on Hockey Northwestern Ontario's Privacy Policy, please visit our website at www.hockeyhno.com				
Date Signed,Player's Signature (Parent if under 18) This card is issued at the discretion of the Branch Executive, and is revocable without notice				