LADIES SUMMER HOCKEY LEAGUE

WEDNESDAY NIGHT LEAGUE

2011 INDIVIDUAL APPLICATION FORM

JOIN US FOR OUR 10TH SEASON

NAME: _____

TEAM (If known): _____ DATE OF BIRTH: _____

HOME PHONE#**:** _____

CELL PHONE#**:** _____

E-MAIL ADDRESS: _____

OPT OUT - ☐ I DO NOT want my phone number/email address to be provided to my teammates.

PLEASE CIRCLE ONE OF EACH OF THE FOLLOWING:

DIVISION:	"A" Slapshot	"B" Slapshot	"C" Slapshot
Position Preferred:	Goal	Defense	Forward
Rate Yourself:	1 2 3 4 5 6 (Being Best)		

Have you ever played in the LSHL before? YES NO

If No, please provide highest level of hockey played: _____

Please list any players that you would like to play with this year: _____

WAIVER AND RELEASE OF LIABILITY: In consideration of your acceptance of my application, I, the undersigned, who is about to participate in the Ladies Summer Hockey League, agrees to abide by the Rules & Regulations set forth. I hereby acknowledge that I have read these Rules & Regulations which are available on the website (www.lshockeyleague.com) or upon request, and, that I understand that aggressive behaviour and poor sportsmanship will not be tolerated.

I recognize and expressly accept the usual dangers and risks inherent in the sport of Ice Hockey, and willingly accept such risks with the understanding that **insurance is not provided**.

This is intended to be a complete and full release, waiver and relinquishment, giving up, forgoing and discharging any and all claims or damages of any kind, character or description against the Ladies Summer Hockey League or Westwood Arenas, and any of its agents, employees or others acting on its behalf as might arise during my participation in the Ladies Summer Hockey League.

*****I have read and understand the above and voluntarily agree to the terms of this release and specific assumption of risk and so indicate by signing and dating this release in the place indicated below.

***** _____ _____ _____

Signature of Applicant | Signature of Parent/Guardian (If applicant is under 18 years of age) | Date

Register early to avoid disappointment. To register, send your cheque in the amount of $290 (includes HST) payable to "Ladies Summer Hockey League", along with this Application Form, to 24 Greenbriar Road, Brampton, L6S 1V6. For more information, please contact Laura at (905) 790-0911.

THE L.S.H.L. RESERVES THE RIGHT TO REFUSE THE APPLICATION OF ANY PLAYER