



**DRUMHELLER DRAGONS  
HOCKEY SCHOOL**

# 2018 REGISTRATION



NAME: \_\_\_\_\_ DOB(dd/mm/yyyy): \_\_\_\_\_ GENDER: male  female

POSITION: forward  defense  goalie  PROVINCIAL HEALTH CARE NUMBER: \_\_\_\_\_

RELEVANT MEDICAL INFO: \_\_\_\_\_

TSHIRT SIZE: \_\_\_\_\_ PARENT/LEGAL GUARDIAN NAME(S): \_\_\_\_\_

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ PROV: \_\_\_\_\_ PC: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ EMERGENCY PHONE: \_\_\_\_\_

## CAMP SESSIONS – AUGUST 20-24, 2018

Please select your camp(s)

**\$350 DAY CAMP**

**\$175 BANTAM PREP CAMP**

**\$175 MIDGET PREP CAMP**

## PAYMENT DETAILS

PAYMENT ENCLOSED: cash  cheque

-Cheques made payable to the Drumheller Dragons.

PAYMENT IN PERSON

-Drumheller Dragons office at 545 Hwy 10 E (Canalta head office building). All methods accepted.

SECURE ONLINE PAYMENT

<https://tickets.drumhellerdragons.ca/events/7515-hockey-school-2018>

-Visa, Mastercard and American Express accepted.

-Under the "Additional Information" section, please specify the name of the registered child.

**\*\*\*REGISTRATION WILL NOT BE COMPLETE UNTIL PAYMENT HAS BEEN RECEIVED\*\*\***

**FAMILY DISCOUNT:** The cost of the Day Camp will be discounted by \$50 per additional child registered. The children must be siblings.

**FEES:** All fees are due upon registration.

**REFUND POLICY:** Refunds will be issued until August 4, 2017. In the event of an injury or accident prior to or during the camp, a pro-rated portion of the registration will be refunded if the request is accompanied by a physician's note. There will be no refund if the player is a no-show or is expelled and/or dismissed for any reason.

**PARENT CONSENT & WAIVER:** In consideration of the Drumheller Dragons Hockey School accepting a player into said hockey school, it is agreed that all risks, including legal risks, relating to the hockey school are assumed without limitation by the undersigned and that this assumption of risk is acknowledged, approved, and agreed to by the undersigned as indicated by their signature hereto.

PRINT NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### HOW TO SUBMIT FORM:

EMAIL: [hockeyschool@drumhellerdragons.ca](mailto:hockeyschool@drumhellerdragons.ca) | FAX: 403-823-2039 | MAIL: Box 2109, Drumheller, AB T0J 0Y0 | IN PERSON: 545 Hwy 10 E Drumheller

NEED MORE INFORMATION? Call the office at 403-823-2022 or visit [www.drumhellerdragons.ca](http://www.drumhellerdragons.ca)