

2021-2022 Player Registration Certificate

			Junior	Senior	
			Goaltender	Import	
Surname	Given Name	Date of Birth: Year	Month	Day	_
				-	
Address City		Province	Postal Code	2	
Telephone No.		Hospitalization No.			
E-Mail:					
Is eligible to play for the					
	1				
Resident at the above address since:	Citizenship				
1 1	Canada 🗆	Other 🔲			
// Day Month Year		Other —			
I last registered with the following Team(s)					
YEAR:TEAM:		In the	Branch/Pro	vince	
YEAR:TEAM:		In the	Branch/Pr	ovince	
			Branch/T	ovince	
I, the undersigned certify the above information	to be true and	in consideration of the gran	ting of this certifica	ate to me with 1	the
privileges incident thereto, and by signing this certificate I have become subject to the rules, regulations and decisions of Hockey					
Canada, it's Board of Directors, 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 such rules, regulations and decisions of Hockey Canada, its Board of Directors, its Branches					
and/or divisions.					
The information above is collected for all registered participants and is required by Hockey Manitoba (it's employees, team officials,					
volunteers, leagues and associations) to facilitate its hockey programs and to administer the rules that govern sanctioned events.					
Hockey Manitoba treats this information with the utmost respect and in accordance with the Hockey Manitoba Privacy Policy at all					
times. For further information on Hockey Manitob			-		
Date Signed,,,	Playe	er's Signature			
Data Size ad	Duoine				
Date Signed,,	Branc	h Approval			
This card is issued at the discretion of the Branch Executive, and is revocable without notice					