



# CYO/Durham Crusaders Hockey Registration Form

[www.cyohockey.com](http://www.cyohockey.com)

For more information, please email [cyohockey@gmail.com](mailto:cyohockey@gmail.com)

*"Celebrating 57 Years of Hockey"*

1953-2010



## Applicant Information

Player Name:		Date of Birth:	Month	Day	Year
Address:		Registration Fees:			
City/Postal Code:		CASH \$	CHEQUE#		
Phone : ( )		Alternative Phone : ( )			
Email address:		Alternative Email Address:			
Father (or guardian):		Mother (or guardian):			
<b>House League</b>		<b>Tier 1 Hockey (full contact PeeWee &amp; up)</b>			
Instr	Tyke	Nov	Atm		
2003 & under	2003 & under	2002-2003	2000-2001	PeeWee	Bantam Midget
				1998-1999	1996-1997 1994-1995
		<b>Representative CC</b>			
		PeeWee	Bantam	Midget	
		1998-1999	1996-1997	1993-1995	
NEW CYO PLAYER: _____		Where played last year: _____		EXISTING CYO PLAYER: _____	
Team Preference: i.e. Team. Coach					
Position Preference:					
Number of years player has played hockey: _____					
Highest Level played (i.e. AAA, AE, House League): _____					
Parent interested in helping with league: _____ No _____ Team _____ Coach _____ Asst.					
_____ Trainer _____ Manager _____ Executive					
Can parent possibly find a sponsor for the team: _____ Yes _____ No					
List Medical Disabilities:					
Comments:					

## Note to Applicants

All parents, players and coaching staff must agree to abide by all CYO, OMHA and City rules, regulations, codes of conduct and bylaws as outlined on their respective websites. Parents are responsible for the transportation and purchasing of proper hockey equipment. Goalie equipment will be provided at the younger ages. It is important that you are aware that while every effort is made to ensure the safety of your child that there is still an element of risk inherent in playing hockey. There will be a \$25 fee charged for NSF cheques.

**Signature of Parent:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The personal information is being collected by the City of Oshawa for the sole purposes of allocating ice time to organizations and individuals in accordance with the City's **Ice Allocation Policy, City of Oshawa Bylaw13-2003, General Fees and Charges** and pursuant to section 11(2) of **Municipal Act, 2001** as amended. All information shall be kept in strict confidence and not used for any other purpose. Once collected, the information will be used only for this allocation purpose, retained and disposed of in accordance with the City's Records Retention By-law and provincial law. By providing this information during registration, participants or their parents/guardians are authorizing the disclosure of personal information to the City, specifically the following information about the participant: **Surname. Parent/guardian's surname if different, Year of birth, Parts of their address: street name, city/town, postal code, Telephone number of participant or of their parent/guardian**

Any questions may be directed to: Sandra Kranc, City Clerk, 5 Floor, Rundle Tower 50 Centre Street South Oshawa ON L1H 3Z7  
Tel: 905-436-5639 fax: 905-436-5697 email: [infoservices@oshawa.ca](mailto:infoservices@oshawa.ca)

Please make cheques payable to "CYO HOCKEY" and return with this form to registration table or mail to:  
CYO Hockey Association  
701 Rossland Rd. E., Suite #341  
Whitby, ON L1N 9K3  
Attention: CYO Registrar

