

# Calgary Sabrecats Lacrosse – 2010 Registration Form

**Deadline: February 28, 2010**

**If the player does not reside within the Sabrecats boundaries, registration will not be accepted without a signed release form from your designated Club. Please attach release to this registration.**

**Player Information:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Birth Date: D \_\_\_\_ M \_\_\_\_  
Y \_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone # \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Alta Health # \_\_\_\_\_ Height: \_\_\_\_ ft \_\_\_\_ in Weight: \_\_\_\_ lbs Gender: Male / Female

Years played lacrosse \_\_\_\_ Shot: Right/ Left Position: Goalie / Runner

Do you play Hockey? Yes / No Level \_\_\_\_\_ Division \_\_\_\_\_ Hockey Assoc. \_\_\_\_\_

**Guardian Information:**

Mother : Name \_\_\_\_\_ Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Father : Name \_\_\_\_\_ Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

Other : Name \_\_\_\_\_ Home # \_\_\_\_\_ Work # \_\_\_\_\_ Cell # \_\_\_\_\_

**Volunteer Information:**

**Parents are expected to participate. Please indicate the area in which you would be willing to assist:**

- ( ) Head Coach ( ) Assistant Coach ( ) Team Manager ( ) Referee ( ) Team Sponsorship ( ) Fund Raising  
( ) Evaluator ( ) Evaluation Phone Caller ( ) Club Executive or Board of Directors  
( ) Other, please specify \_\_\_\_\_

**Fee: CIRCLE appropriate division:**

Year of Birth	04,05,06	02-03	00-01	98-99	96-97	94-95	89-93	<b>CIRCLE if registering for the girls- only Program</b>
Division > CIRCLE	MINI TYKE	TYKE	NOVICE	PEE WEE	BANTAM	MIDGET	JUNIOR	
Registration fee **	\$175	\$250	\$265	\$310	\$340	\$340	\$595	
*\$50 Fee - 10 tickets								Yes or No
ADD Late Fee \$50 ( after March 1,2010)								

\*There will be a MANDATORY \$50.00 fee for a raffle of a 2010 Buick Lacrosse car (\$50.00 = 10 tickets to sell to recoup your fee)

**\*\* Add \$50 late fee if postmarked after March 1<sup>st</sup>, 2010**

Sabrecats Use Only	Amount paid \$	Cheque #	Cash	Dated	Accounting

**Send this completed registration AND a signed waiver with payment to:  
Calgary Sabrecats Lacrosse Club, 128 Strathaven Circle SW, Calgary Alberta T3H 2K8  
Make cheques payable to: Calgary Sabrecats Lacrosse Club**

### Sabrecats Lacrosse 2010 Registration Form

**This registration and waiver must be signed by a fully authorized and responsible parent or guardian.**

#### **Player Information:**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Birth Date: D\_\_\_\_ M\_\_\_\_  
Y\_\_\_\_

#### **Waiver:**

I/We, the parent(s)/guardian(s) of the above named registrant, or the above registrant, hereby give my/our approval of his/her participation in any or all activities under the jurisdiction of the Alberta Lacrosse Association, its member association, incorporated or unincorporated lacrosse clubs, community associations, and lacrosse team organization during the current season. I/We assume all risks and hazards with respect to my/his/her participation in these activities, as well as all risks and hazards incidental to the conduct of the activities and transportation to and from the activities. I/We further hereby release, absolve, indemnify and hold harmless all organizers, coaches, supervisors, managers and officials appointed by the organizations and associations mentioned above. I/We likewise release from responsibility any person transporting our child to and from the activities. I/We likewise waive, to the extent not covered by liability insurance, any claim against any person transporting the registrant to or from the activities. I/We know, understand and realize that there are risks involved in playing lacrosse which include physical contact, running, throwing and catching a ball with a lacrosse stick, and use of a lacrosse stick to contact and restrain players. I/We know and understand that a lacrosse organization is available to explain these risks if I/We should so wish to be made more fully aware of same.

Date: \_\_\_\_\_, 2010      Signature of Guardian: \_\_\_\_\_