

PERSONAL INFORMATION (The provided information will be kept strictly confidential. Access limited to the TFHC executive and coaches)

First Name: _____ **Last Name:** _____
Date of Birth: _____ **Street Address:** _____
Phone #: _____ **City:** _____
Relevant Health Information: _____ **Postal Code:** _____
(Meds/Allergies) _____ **Email (required):** _____
This email address will be added to the TFHC mailing list.

Emergency Contact (Name & Phone #): _____

Occupation Status: Please check (✓) the appropriate box - Post-Secondary Student(*) Employed Other

* - Post-Secondary Student means a full-time student at any private or public post-high school educational institution.

PROGRAM FEE FOR THE SPRING TO EARLY-SUMMER PERIOD:

ADULT	POST-SECONDARY	OTHER (\$_____)
<input type="checkbox"/> Men (\$180)	<input type="checkbox"/> Men (\$125)	<input type="checkbox"/> Men
<input type="checkbox"/> Women (\$180)	<input type="checkbox"/> Women (\$125)	<input type="checkbox"/> Women

TERMS & CONDITIONS

The Program Fee covers the period April 15 to July 15 (the "Season").

Terms & Conditions:

- Fees are to be paid in full within the first week of the start of the Program (INTERAC Email Money Transfer, cash or cheque payable to: Toronto Field Hockey Club).
- Fees paid solely provide the right to play in the program chosen for the Season. Fees to play in club leagues and tournaments during the Season are incurred on an event by event basis.
- Payment of the fee and signing of the form enrolls the player for injury and liability insurance with Specialty Risk Insurance Managers Ltd., of Langley, British Columbia, www.srim.ca, Policy Number SP003380
- All bank charges from dishonoured cheques plus a \$30 administration fee will be charged.
- **Special arrangements for delayed payment or payment by installment is available by written request to the Treasurer (treasurer@torontofield.com).**
- Fifty percent of the Program Fee will be refunded if a request for cancellation of registration is made within three weeks of the signing of this form.
- Failure to pay the Program Fee on time can result in cancellation of registration or in a \$20 penalty for every month the balance is outstanding.

For Official Use Only:

Payment Attached: <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> EMAIL <input type="checkbox"/> Cash <input type="checkbox"/> Cheque: _____	Payment Received: Date: _____
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I hereby agree to the payment terms and conditions as stated above. I accept that the decision of the TFHC accepting or canceling my registration is final. While participating in the TFHC's field hockey programs during the period from April 1, 2020, until October 31, 2020, I knowingly accept that TFHC will provide for my well being but will be released and held harmless from all actions, damages or claims arising out of participation in the above-mentioned Program.

Signature and Date

Club Executive signature

TO COMPLETE REGISTRATION:

1. Send an email to secretary@torontofield.com to confirm your interest in registering in a TFHC program.
2. Fill in the form in its entirety.
3. Mail the form with a cheque to the address below or fax the form to the number below and bring your cheque to the first practice. The form can also be scanned and sent by email to secretary@torontofield.com.
4. Payment can also be done via the Internet using INTERAC Email Money Transfer. Go to <http://torontofield.com/registration.html> to get full instructions. WE PREFER THAT YOU USE THIS METHOD TO PAY YOUR FEES AS IT SAVES US THE ADMINISTRATIVE TASK OF DEPOSITING CHEQUES AND CASH.