Toronto Field Hockey Club

www.torontofield.com

Indoor Season Form 2026/2027 – Adult

PERSONAL INFORMATION *(This information will be kept strictly confidential. Access is limited solely to the TFHC Executive and Coaches)*

First Name: _____ **Last Name:** _____

Date of Birth: _____ **Street Address:** _____

Phone #: _____ **City:** _____

Relevant Health Information: *(Meds/Allergies)* _____ **Postal Code:** _____

Email (required): _____
Please note that TFHC correspondence is primarily via email.
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 INFORMATION

ADULT	POST-SECONDARY	OTHER ($_____)
❑Men ($250)	❑Men ($130)	❑Men
❑Women ($250)	❑Women ($130)	❑Women

TERMS & CONDITIONS

The Program Fee covers the period November 7th, 2026, to April 4th, 2027 (the "Season").

Terms & Conditions:

1. Fees are to be paid in full within the first week of the start of the program.
2. Fees paid solely provide the right to play in the program chosen for the Season. Fees to play in leagues and tournaments during the Season are incurred on an event-by-event basis.
3. Payment of the fee and signing of the form enrolls the player for injury and liability insurance through Special Risk Insurance Managers Ltd. of Langley, BC, policy SP025284, expiring October 31st, 2027.
4. Special arrangements for delayed payment or payment by installment is available by written request to the Treasurer (treasurer@torontofield.com).
5. 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.
6. 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.

I hereby agree to the Terms and Conditions as stated above. I accept that TFHC will provide for the health and welfare of each participant but will be released and held harmless from all actions, damages or claims arising out of participation in its programs during the period November 7th, 2026, until October 31st,2027. I accept that the decision of TFHC to accept or cancel my registration in its programs is final.

_____ _____ _____
Signature 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. Please send the completed form by email to secretary@torontofield.com, or deliver it in person before your first program session.
4. Payment is made using INTERAC Email Money Transfer or by cash ONLY. Please send your fee amount to FEES@TORONTOFIELD.COM.