



# West Ferris Ringette Association – The Birthplace of Ringette



## 2018-2019 Registration Form

PLAYER INFORMATION			
Surname:		Given Names:	
Address:		City:	Postal Code:
Telephone:		E-mail:	
Date of Birth: (MM/DD/YYYY)		Gender: (M/F)	New Player? Yes / No
A copy of the player's birth certificate must be provided by new members and by those players turning 18 as of December 31st			
School Attending in 2018-2019			
Name of Current Player Who Referred You To Ringette (if applicable)			
One Special Request: (e.g. same team for siblings, ride-sharing, new players to the association, playing with a friend. The person must reciprocate the request). Every effort will be made to accommodate but the association makes no guarantees)			
I would like to play as a goalie <input type="checkbox"/>		I would like to borrow equipment (new players only): <input type="checkbox"/> Security deposit of \$100.00 is required upon borrowing of the equipment. The deposit will be returned to you at the end of the season in exchange for the equipment.	

PARENT/GUARDIAN INFORMATION AND PLAYERS AGE 18 AND OLDER	
Parent/Guardian's name:	Phone Number (if different from above)
Parent 1):	
Parent 2):	

PHOTO RELEASE		
<p>During the course of our activities, there may be a time when photographs are taken of your child. These photos may be taken for publicity purposes and may appear in local newspapers or on our website. Please check one of the following options:</p> <p>_____ I <b>DO</b> authorize WFRA to use photos of my child    _____ I <b>DO NOT</b> authorize WFRA to use photos of my child</p> <p><b>I, hereby authorize the West Ferris Ringette Association (WFRA) to publish photograph taken of persons under my legal guardianship for use in print, online and municipal publications. I acknowledge that participation is voluntary and that neither I nor the minor children will receive any financial compensation for use of these photographs. I further agree that my ward's participation in any publication, photo or website confers upon me or my child no rights of ownership of the original photo or the forum in which it was used. I hereby release WFRA from any liability or third party claims regarding the use of these photographs.</b></p>		
<table style="width: 100%;"> <tr> <td style="width: 50%;">Signature of Parent / Legal Guardian/ Adult Player</td> <td style="width: 50%;">Date</td> </tr> </table>	Signature of Parent / Legal Guardian/ Adult Player	Date
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Select a Division	Birth Year	Recreational/Competitive	Fees for registration received by May 31 <sup>st</sup> *	Fees for registration received after June 1 <sup>st</sup>
<input type="checkbox"/> Learn to Skate	2014 & older	N/A	\$150.00 (incl. discount)	\$175.00
<input type="checkbox"/> U07/U10	2009 – 2014	N/A	\$250.00 (incl. discount)	\$275.00
<input type="checkbox"/> U12	2007 – 2008	N/A	\$350.00 (incl. discount)	\$375.00
<input type="checkbox"/> U14	2005 – 2006	N/A	\$400.00 (incl. discount)	\$425.00
<input type="checkbox"/> U16	2003 – 2004		\$400.00 (incl. discount)	\$425.00
<input type="checkbox"/> U19	2001 – 2002		\$400.00 (incl. discount)	\$425.00
<input type="checkbox"/> 18+	2000 & older		\$400.00 (incl. discount)	\$425.00

**\*\$25.00 discount  
on any  
registration  
received before  
May 31st**

Select a payment option	CASH OR CHEQUE PAYMENT OPTIONS		DEBIT & CREDIT CARDS AS ONE LUMP SUM	
	Cheques payable to WFRA		AT SOURCE FOR SPORTS	
	Registration up to May 31 <sup>st</sup>	Registration after June 1 <sup>st</sup>	Registration up to Sept. 1 <sup>st</sup>	Registration after Sept. 2 <sup>nd</sup>
<input type="checkbox"/> Option #1	N/A		100 % due by Sept. 15 <sup>th</sup>	100% due within 2 weeks of registration
<input type="checkbox"/> Option #2	100% due upon registration		N/A	
<input type="checkbox"/> Option #3	50 % due by Sept. 15 <sup>th</sup> (post dated cheque) 50% due by Oct. 31 <sup>st</sup> (post dated cheque)			
<input type="checkbox"/> Option #4	6 post dated cheques Apr. to Sept.	N/A		

Please check if you will be applying through North Bay KidSport.

For registration up to September 1st, please ensure to send you application to KidSport by September 15<sup>th</sup>.

For all registration after September 2<sup>ND</sup>, application to KidSport must be done within two weeks of registration.

Please notify the treasurer as soon as you have received your voucher for processing at treasurer@westferrisingette.ca

**REFUND POLICIES**

- For approval for refund, the player:
1. Has quit before going into the first ice time.
  2. Is injured and has a doctor's note to show that she/he cannot play for the remainder of the season.
  3. Is a first time player who no longer wants to continue playing after the first four games.

A written note describing the reason for the request and signed by the player or in the case of a minor, by the parents who enrolled them must be sent to the association as soon as the player is no longer participating. The association will review the request.

If the reason is not listed above, the association will decide refund on a case by case basis and reserves the right to deny the request.

Refund Rate	
Before first ice time	100% less ORA FEES
After first ice - October 31 <sup>st</sup>	70% less ORA FEES
November 1st - December 31 <sup>st</sup>	50% less ORA FEES
After January 1 <sup>st</sup>	No refund

**I, the undersigned (adult registrant or legal parent/guardian), in registering with the West Ferris Ringette Association (WFRA) and the Ontario Ringette Association, agree to abide by and be governed by the Operating Procedures and Bylaws of the West Ferris Ringette Association and all prescribed by-laws, rules, regulations, policies and philosophies as outlined in the Operating Manual of the Ontario Ringette Association.**

<b>Signature of Parent / Legal Guardian/ Adult Player</b>		<b>Date</b>

All post dated cheques are to accompany the registration form. Registrations and cheques (no cash) can be mailed to:

WFRA Registrar  
 42 Gertrude Street East  
 North Bay, ON  
 P1A 1J8

For cash payment, please contact the treasurer at treasurer@westferrisingette.ca

**WFRA Use Only**

Date of registration:	Level (2016/2017 Season)		
Copy of Birth Certificate Witnessed:			
Registration Received by (signature of WFRA registrar or designate):			
Payment Date:	Method (Cash/Chq/Credits)	Amount	Receipt#