

KENT MINOR HOCKEY



**KENT MINOR HOCKEY ASSOCIATION
2021- 2022 PLAYER REGISTRATION FORM**

Mailing Address:
KMHA, P.O. Box 485, Chatham, Ontario N7M 5K6
Registration inquiries: registrar@kentminorhockey.com

Player's Name: _____ Date of Birth: _____
 First Last Month Day Year

Sex: Male Female (please circle)

Street Address: _____

City: _____ Postal Code: _____

Parent/Guardian Name: _____ Primary Phone #: _____

Primary Email Address: _____

I would like to register for:

House League (Chatham) Local League (Tilbury) (Players born 2010 and older)

Preferred Position:

Player _____ Goaltender _____ No preference _____

Does registrant have any known disabilities? YES NO If yes, explain _____

Is this your first year of hockey?

Yes No

If Yes: Please attach a copy of the player's Birth Certificate and Respect in Sport Parent Program Certificate Number. This documentation is MANDATORY, new player registrations will not be processed until it has been received.

Fees (if paid before July 31st)

	First child	Additional child
U7 House League (players born 2015, 2016, 2017)	\$450.00	\$415.00
House League - Chatham (players born 2002-2014)	\$610.00	\$575.00
Local League – Tilbury (players born 2003-2010)	\$720.00	\$685.00
Travel (AA/AE)	\$610.00 (+ Assessment)	\$575.00 (+ Assessment)

Travel tryout fee will be \$85 per child.

A late fee of \$50 will apply between August 1st – August 15th

Are you interested in Coaching in our House League or Local League divisions? (Please circle) YES NO

Current Credentials:

RIS Activity Leader _____ Gender Identity Course _____ Coach _____ Trainer _____

None (willing to complete training necessary) _____

Terms and Conditions:

- Payment must be made in full prior to participating in on-ice activity unless other arrangements have been approved.
- Cheque or money order payable to **KMHA**. \$20.00 NSF fee applied to returned cheques.
- Visa or Mastercard payment option available July 1st – August 15th using our On-line Registration.
- Cash is accepted at scheduled walk-in registration days.
- All registrations for Kent Minor Hockey Association are subject to approval by our Executive.

Signature of Parent/Guardian/Applicant (if over 18) Date Registration Officer

Office Use:

Chq # _____ Money Order # _____ Cash _____

Amount _____

Kent Minor Hockey Association

Member Acknowledgement

By registering my child in Kent Minor Hockey Association, I/we have read and understand the Kent Minor Hockey Association Code of Conduct shown on our website and agree to respect and abide by this Code of Conduct.

I understand the Code of Conduct includes all players, guardians, parents, coaches, officials, volunteers, directors, officers, committee members, conveners, team managers, trainers, administrators, and employees involved in Kent Minor Hockey Association and OMHA activities and events.

I understand that failure to comply with this Code of Conduct and the Constitution of Kent Minor Hockey Association may result in loss of membership and privileges which come with membership in the OMHA including the opportunity to participate in the OMHA and Kent Minor Hockey activities and events both present and future.

Date: _____

Player Name: _____

Signature of Parent/Guardian or Player (if over 18 yrs)



ONTARIO HOCKEY FEDERATION

400 Sheldon Drive, Unit 9, Cambridge, Ontario N1T 2H9
T: 226 533.9070 F: 519 620.7476
www.ohf.on.ca

Proud Branch Of



Ontario Hockey Federation Rowan's Law Acknowledgement Form

The Ontario Government has enacted *Rowan's Law (Concussion Safety), 2018*, S.O. 2018, c. 1 ("Act"). Ontario Regulation 161/19, the Act requires all sport organizations as defined in the Regulation ("Sports Organization"), which includes the Ontario Hockey Federation ("OHF"), to have a Concussion Code of Conduct. This Concussion Code of Conduct must require participants, as set out in the Act, to review the Ontario Government's issued Concussion Awareness Resources on an annual basis. A participant is subject to a Concussion Code of Conduct for each Sports Organization a participant registers with.

The OHF Code of Conduct is located at (insert web address) and the applicable age appropriate Concussion Awareness Resources are located at www.ontario.ca/concussions. The OHF Concussion Code of Conduct and the appropriate Concussion Awareness Resources must be reviewed before you can register/participate in the OHF.

- [10 and Under Concussion Awareness Resource](#)
- [11-14 Concussion Awareness Resource](#)
- [15 and Over Concussion Awareness Resource](#)

If you would like to have a record of your review of the concussion awareness resources, you can complete this form and keep it as a receipt to remind you of the date on which you reviewed it.

Acknowledgement of Review

I, _____ (first name) _____ (last name) _____ (birth date yyyy/mm/dd of athlete, Team Official or On-Ice Officials name) confirm that I have reviewed the OHF Concussion Code of Conduct (Appendix A) and the appropriate Concussion Awareness Resources and commit to operating within the parameters of the OHF Concussion Code of Conduct under the role which I have registered with the OHF.

Signature

Date

If the participant above is under the age of the 18, then the parent of that participant must also sign the Acknowledgement set out below.

I, _____ (print name of parent if above signatory is under 18) confirm that I have reviewed the OHF Concussion Code of Conduct and the appropriate Concussion Awareness Resources and commit that the signatory above and I will operate within the parameters of the OHF Concussion Code of Conduct under the role which I have registered with the OHF.

Signature

Date

Disclaimer: In order to register/participate in the OHF this signed form must be submitted to the Minor Hockey Association that you are registering with.

OHF Members





APPENDIX A

OHF Concussion Code of Conduct

2019-2020

I will help prevent concussions by my commitment to:

- Wearing the proper equipment for my sport and wearing it correctly;
- Respecting the rules of my sport or activity; and
- My commitment to fair play and respect for all* (respecting other athletes, coaches, team trainers and officials).

I will care for my and others health and safety by taking concussions seriously, and I understand that:

- A concussion is a brain injury that can have both short- and long-term effects;
- A blow to the head, face or neck, or a blow to the body that causes the brain to move around inside the skull may cause a concussion; and
- A person doesn't need to lose consciousness to have had a concussion.

I will commit to:

- report any possible concussion received during participation in the OHF to a designated person;
- recognizing a concussion or possible concussion and the reporting to a designated person when an individual suspects that another individual may have sustained a concussion;
- sharing any pertinent information regarding incidents of a removal from sport with the Player's school and other sport organization with which the player has registered;
- sharing any pertinent information regarding incidents of a concussion that have occurred outside of participation in the OHF to a designated person with your/individual's Team;
- Complete Injury Report Forms in a timely manner and ensure they are submitted to the Member;
- Give commitment to providing opportunities before and after each training, practice and competition to enable participants to discuss potential issues related to concussions; and
- Maintain an open dialogue with all athletes and participants (and parents/guardians in cases of minors) about their health and any signs and symptoms of concussion they may experience.

I will commit to respect the OHF Removal and Return to Play Protocol by:

- Understanding that if I have a suspected concussion, I will be removed from sport and that I will not be able to return to training, practice or competition until I undergo a medical assessment by a medical doctor or nurse practitioner and have been medically cleared to return to training, practice or competition;
- Understanding I will have to be medically cleared by a medical doctor or nurse practitioner before returning to training, practice or competition;
- Respect the roles and responsibilities of all coaches and health care professionals in Return to Play protocol; and
- Respond appropriately with Return to Play protocols if a participant is experiencing concussion related symptoms or if you suspect any participant has sustained a concussion.