

# MARKHAM MEN'S RECREATIONAL HOCKEY LEAGUE

2018 – 2019 SEASON - APPLICATION FORM

**PLEASE NOTE**

**\*\*\* FEES FOR THE 2018 / 2019 SEASON ARE \$575.00 \*\*\***

**However, for existing league members, if 2018 dues are paid in full by April 10<sup>th</sup>. 2018, the annual fee will be \$525.00**

**Unfortunately for the 2018/19 SEASON, the City of Markham has imposed a whopping 13.5% increase for arena ice costs, it is therefore the reason for the upsurge in player fees for the upcoming season:**

Fee payments may be made by cheque or by e-transfer. The e-transfer may be sent directly to Chuck Oliver using the [c.g.oliver@sympatico.ca](mailto:c.g.oliver@sympatico.ca) email address: - If using the e-transfer method please use the password "HOCKEY"

**APPLICATIONS WILL NOT BE ACCEPTED WITHOUT THE 2018/19 FEE PAYMENTS BEING INCLUDED,**

**Please note: There will be no refunds or adjustments for any reason after November 30th. 2018**

For those current league members wishing to defer payment until September 2018, a \$50.00 non-refundable cheque is required upon application. A postdated cheque for the balance (\$525.00) dated September 1<sup>ST</sup>. 2018 must accompany this application; otherwise the application will not be processed.

**NEW OR FIRST TIME APPLICATIONS REQUIRE A POSTDATED CHEQUE IN THE AMOUNT OF \$575.00 DATED SEPTEMBER 1ST 2018;**

**I,** \_\_\_\_\_

On behalf of myself, my heirs, executors successors and assigns, release, discharge and agree to indemnify and save harmless, the Markham Men's Recreational Hockey League from any claims, demands, and actions resulting from my participation in league activities.

All sweaters, socks, and other equipment which may be provided to me by the league is the property of the league and I agree to return them at the end of the season, reasonable wear and tear only excluded.

I agree to abide by the rules and regulations of the league as they may be amended from time to time.

Dated this day .....of.....2018

**SIGNATURE** \_\_\_\_\_

<b>DO YOU EXPECT TO MISS MORE THAN 6 WEEKS DURING THE SCHEDULE?</b>	Yes	no
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NAME			
ADDRESS			
CITY		POSTAL CODE:	
Area Code	HOME PHONE		
Area Code	BUSINESS PHONE	extension	
<b>E-MAIL ADDRESS</b>			
AGE		BIRTH DATE:	
PLAYING POSITION PREFERRED			
Playing experience: Pro - Junior - College/University - Recreational - Pick-up - New			
<b><u>NEW PLAYERS ONLY - Please circle one</u></b>			
<b>FOR LEAGUE USE ONLY</b>			
<b>APPLICATION #</b>		<b>DIVISION &amp; TEAM #</b>	
2017/18 TEAM			
2017/18 CAPTAIN:			
PAID	CASH	CHEQUE	E-TRANSFER