



# Metcalfe and District Ringette Association

Box 429 Metcalfe, Ontario K0A 2P0  
www.metcalfe.ringette.org mdra@storm.ca

## 2005-2006 Registration Form



Player's Last Name:	First Name:
Female ___ Male ___	Mother/Guardian Name:
Date of Birth (yy/mm/dd):	Father/Guardian Name:

Address:		
City:	Postal Code:	Resident of City of Ottawa? Yes ___ No ___
Phone#:	Email:	

Doctor's Name:	Phone#:
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Medical Problems:
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Emergency Contact:	Phone#:
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Birth Years	Level*	Fee Until June 30**	Fee After June 30**	Power Skating	Family*** Discount	Total
1998-2001	Bunny	\$225	\$250	n/a	-\$15	_____
1996-1997	Novice	\$360	\$385	\$50	-\$15	_____
1994-1995	Petite	\$360	\$385	\$50	-\$15	_____
1992-1993	Tween	\$360	\$385	\$50	-\$15	_____
1990-1991	Junior	\$360	\$385	\$50	-\$15	_____
1987-1989	Belle	\$360	\$385	\$50	-\$15	_____

\* Where numbers permit, under-age players may play at a higher level at the discretion of the Association.

\*\* Includes a \$40 non-refundable administrative fee.

\*\*\* Family discount applies to 2nd and subsequent players in the same family.

**Cheques payable to "MDRA" MUST BE INCLUDED WITH THE REGISTRATION FORM**  
Payments can be made in up to three installments due September 1, October 15 and December 1, 2005.  
An NSF fee of \$25 will be applied to all cheques returned.

1. Is this a new player? (If YES attach copy of birth certificate) Yes \_\_\_ No \_\_\_
2. How did you find out about MDRA registration?

Returning player \_\_\_ Website \_\_\_ Ad Bag \_\_\_ Newspaper ad \_\_\_  
Other (please specify): \_\_\_\_\_

3. Is it ok to use team or game photos including your child for promotion (eg. newspaper, web)? Yes \_\_\_ No \_\_\_
4. If either (or both) parent/guardian is interested in coaching this child's team, please indicate:

Name:	Coaching Qualifications:
Name:	Coaching Qualifications:

I accept all risks arising from the participation of the above player in the MDRA and release same association from any injury or damage claim or action. I also agree, that the player and all family members will abide by the Association's constitution and all NCRRL, Ontario Ringette Association and Ringette Canada constitutions, by-laws, regulations and playing rules. I certify that the player lives at the address shown above.

Parent/Guardian Signature:	Date:
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Association Use:	Processed by (signature):	Date:
Cheque#, amount, date:	1:	2:
		3: