



Lou Lemire's
Hockey Skills Camp

Port McNeill

2012 Registration
& Payment Form

Please mail and make cheque payable to:

Summer Hockey Skills Camp

4257 Sage Mesa Drive

Penticton, BC

V2A 9A3

Player Name:		Parent Name:	
Address:		City & Province:	
Postal Code:		Phone Number(s):	
Email Address:		Medical No:	

Registered Player Information

Age:	Position:	Height:	Weight:	Male or Female	Level:
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Port McNeill July 9-13 Hockey Camp Tuition Fees & Programs		Fee	PLEASE CHECK APPROPRIATE BOX	Extension
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Early Registration Discount	\$370.00	<input type="checkbox"/>	\$
After April 1st	\$395.00	<input type="checkbox"/>	\$
After May 1st	\$425.00	<input type="checkbox"/>	\$
Camp Jersey (Please circle appropriate size) Note: Optional Youth M L XL Adult S M L XL	FREE	<input type="checkbox"/>	FREE
Name on Jersey (Before June 1st)	\$15.00	<input type="checkbox"/>	\$
Specialized Shooting & Scoring Clinic (Mon-Thurs)	\$40.00	<input type="checkbox"/>	\$
T-Shirt (Please circle appropriate size) Note: Optional Youth S M L XL Adult S M L XL	\$15.00	<input type="checkbox"/>	\$
Camp Hat (One size fits all!)	\$20.00	<input type="checkbox"/>	\$
		<input type="checkbox"/>	\$
		<input type="checkbox"/>	\$
Adult Camp (Mon-Fri)	\$150.00	<input type="checkbox"/>	\$
After May 1st	\$170.00	<input type="checkbox"/>	\$

Sub-total	\$
HST (12%)	\$
Total	\$

Payment Information

Enclosed please find registration deposit of \$ _____ (minimum \$100.00 per registrant) and a post dated cheque dated May 1st or earlier for \$ _____ the balance of my registration Fee. The school will not consider the applicant registered after May 1st, 2012 unless full payment and a signed agreement have been received. You will be notified of registration form and deposit. A schedule of the week will be sent. **We reserve the right to re-schedule or re-group, according to enrollment and ability.**

Agreement

In consideration of the acceptance as a student in the Summer Hockey Skills Camp program we, the undersigned parents/participant, release, remise, and discharge Summer Hockey Skills Camp from all claims, actions, causes of action, damages, and demands by the undersigned parents for loss or injury resulting directly or indirectly from the participation of our child in the program.

The undersigned parents/participant covenant and agree to indemnity and save harmless Summer Hockey Skills Camp from all claims, actions, damages and demands which may be brought by or on behalf of our child against Summer Hockey Skills Camp arising out of his/her participation in the program, including all costs, damages and expenses in defending such claims or actions and against any loss arising from therefrom.

We acknowledge that the student cannot be accepted into this program but for our executing this release and indemnity. The school will not be held responsible for any acts of God (floods, power failures, etc.) which may result in the termination of the school itself.

The applicant agrees to the following **refund policy**: Refunds will be issued up to May 30, 2012 less a \$50.00 administration fee. In the event of any injury or accident prior to or during the camp, the appropriate portion of the registration fee will be refunded if the request is accompanied by a doctor's certificate. No refund will be given if a player leaves on his own accord or is expelled from the camp. Disciplinary problems will not be tolerated. If any serious problems arise (alcohol, drugs, theft, etc), the person(s) involved will be expelled immediately without refund of tuition. No students are allowed away from the arena unless accompanied by staff. Camp reserves the right to use any photos taken during the camp for promotional purposes. All NSF cheques will be subject to a \$30 fee.

We have read the release and understand that it is a full final release of all claims for injuries and damages sustained in the Summer Hockey Skills Camp program and have read the agreement to indemnity, and understand the responsibilities we have assumed thereunder.

Signature of Parent/Guardian _____

Date _____