

**4<sup>th</sup> SEASON**  
**FALL/WINTER 2011-12**  
**FULL ICE 50n5**

**\$100 DISCOUNT**

For any 1995-96 born Midget player registering for both the Wave High School Hockey League and the Original Six Midget House League!

**WAVE HOCKEY**  
**ORIGINAL SIX**  
**MIDGET**  
**HOUSE LEAGUE**



**DETAILS**

*This league is open to ALL students currently attending High School. Get your buddies together and sign up as a group!*

- ★ No current Rep players are eligible
- ★ Sunday afternoon and evening games
- ★ 26 games guaranteed, including playoffs
- ★ Season runs September '11 - March '12
- ★ Min. of 14 players, max. of 16 (includes Goalie)
- ★ No bodychecking
- ★ Quality officiating
- ★ Online schedule & stats
- ★ Jersey and socks included

**NOTE:** *If there are enough players, there will be Junior (Grades 9-10) and Senior teams (Grade 11+)*

**BEST ICE IN HALTON!**

PHOTO COURTESY OF BRENDAN FIFIELD CCHL PHOTOS

**ONLINE REGISTRATION NOW AVAILABLE!**

PLAYERS GRADUATE FROM THIS PROGRAM INTO THE WAVE ADULT HOCKEY LEAGUE (WAHL!)

**PRICING**

**\$5950** +HST Team Entry

**\$395** +HST Individual Entry  
*(Individual registrants are not guaranteed a roster placement)*



Registration available online at  
**WWW.WAVEHOCKEY.CA**  
or at Wave Twin Rinks

Contact us @ 905-336-3434 ext. 46  
or [jbondy@wavehockey.ca](mailto:jbondy@wavehockey.ca)

# WAVE HOCKEY

## REGISTRATION FORM (Please print)

Once completed, please fax to 905-336-9311 or drop off at Wave Twin Rinks (1179 Northside Rd, Burlington, ON L7M 1H5)

### HIGH SCHOOL HOCKEY LEAGUE - FALL/WINTER 2011-12

Participant's Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Participant's Date of Birth (yyyy/mm/dd): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Sex:  Male  Female

Approx. Height (ft.) \_\_\_\_\_ Weight (lbs) \_\_\_\_\_

Team Name / Coach Name if applicable: \_\_\_\_\_

Current High School: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Level of Hockey played last season: \_\_\_\_\_

Request to play with: \_\_\_\_\_

Position:  Forward  Defense  Goalie

Are you a Parent/Guardian interested in coaching?:  Yes  No

League Price: Team Entry is \$5,950 +HST = **\$6,723.50**  
Individual Entry is \$395.00 +HST = **\$446.35**

Receive a \$100 DISCOUNT for any 1995-96 born Midget player registering for both the Wave High School Hockey League and the Original Six Midget House League!

*Price includes jerseys and socks. Choose your school colours!*

Payment Options:  Cash  Cheque (Payable to Wave Hockey)  Visa  MasterCard

Credit Card #: \_\_\_\_\_ Expiry: \_\_\_\_\_ / \_\_\_\_\_

REGISTRATION CANCELLATIONS ARE SUBJECT TO A \$25 SERVICE CHARGE.

THE UNDERSIGNED IS RESPONSIBLE FOR THE CONDUCT OF THE PLAYER WHILE PARTICIPATING IN THIS PROGRAM. THE PLAYER SHALL BE GOVERNED BY THE RULES ESTABLISHED BY WAVE HOCKEY INC. IT IS UNDERSTOOD THAT THE UNDERSIGNED PERSON OF LEGAL AGE OR LEGAL GUARDIAN SHALL NOT HOLD THE LEAGUE OR THEIR INSTRUCTORS, ADMINISTRATORS, OFFICIALS, OR THE FACILITY USED LIABLE IN THE EVENT OF INJURY OR LOSS IN ANY MANNER WHATSOEVER. I SPECIFICALLY WAIVE, GIVE UP AND RELEASE WAVE HOCKEY INC., ITS RELATED COMPANIES AND THEIR STAFF FROM ALL LIABILITY FOR ANY CLAIM FOR DAMAGES WHICH I MAY HAVE RELATING TO INJURIES OR ILLNESS THAT MY CHILD MAY SUSTAIN. BY SIGNING THIS WAIVER, I ALSO CERTIFY THAT MY CHILD IS IN GOOD HEALTH, WITH NO CHRONIC ILLNESS OR ABNORMAL TENDENCIES. THE PLAYER LISTED ABOVE IS REGISTERED UNDER THE CARE OF THE UNDERSIGNED AND ASSUMES ALL RISKS THROUGH ENROLLMENT IN THIS PROGRAM WHICH CONSISTS OF PHYSICAL INTERACTION CAPABLE OF INJURY. THE PLAYER MUST WEAR ALL APPROVED HOCKEY EQUIPMENT INCLUDING HELMET, FULL FACE MASK, SHIN PADS, ELBOW PADS, HOCKEY GLOVES, HOCKEY PANTS, SHOULDER PADS, MOUTH GUARDS AND HOCKEY SHIRT. I HAVE READ AND UNDERSTAND ALL ITEMS ON THIS PLAYER FORM. I THE UNDERSIGNED AGREE TO ALLOW WAVE HOCKEY INC AND/OR ITS RELATED COMPANIES TO USE THE PARTICIPANTS' NAMES AND OR PICTURES FOR ADVERTISING PURPOSES.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_



We develop and prepare athletes for scholarships, not just promote them. Our High School Development Program can be *free!* Visit [www.ssbam.ca](http://www.ssbam.ca) for more information.