

Registration Form

Sessions instructed by **Dan Selin** (Canada's most senior hockey skills instructor), **Maria Dominico**, **Madison Desmarais**, and **ex-OHL & NCAA players**

To register, complete this form, scan or photograph, and e-mail to: danselinhockey@gmail.com
You can also call 705 471 6604, or visit www.hockeycpn.com to register.

NOTE: E-mail will be the **only method** used to communicate with participants.

Please **PRINT CLEARLY** and ensure contact information is **CORRECT**.

1st child \$300 Registration paid by: cash
 e-transfer

Name..... Age

Telephone: (705)

E-mail:

Check the box next to the session you are registering for:

U11 8 on-ice sessions

U13 8 on-ice sessions

U16 8 on-ice sessions

Discount of 10% available for 2nd child registered from the same family. Complete the 2nd Child section (below) only if this participant is the second child registering from the same family.

2nd child (10% off full price) \$270 Registration paid by: cash
 e-transfer

Name..... Age

Telephone: (705)

E-mail:

Check the box next to the session you are registering for:

U11 8 on-ice sessions

U13 8 on-ice sessions

U16 8 on-ice sessions

Total amount paid

\$.....

Payment in cash or e-transfer to: danselinhockey@gmail.com

Full Payment \$300.00

Payment due at time of registration

E-transfer: danselinhockey@gmail.com **Subject line:** Spring 2024 Hockey School. Print and complete this Registration Form, take a photo, and e-mail to danselinhockey@gmail.com

Liability Waiver

As Parent/Guardian for the above listed participant(s), I hereby release Daniel Selin, the instructors, and all staff from any possible claims, liabilities, obligations, or responsibilities arising from any and all accidents, injuries, or loss of equipment, whether incurred on-ice or off-ice, hockey-related or not, while participating in Dan Selin's Hockey Instructional Sessions. I further certify that the participant(s) is in good health and capable of participating in physical activities of a vigorous athletic agenda.

Parent / Guardian (print name):

.....

Signature:

Tel (705) Date

E-mail address:

