

MIDDLE LEAGUE REGISTRATION

WOMEN'S HOCKEY LEAGUE 2018-2019
FINAL DEADLINE: MONDAY, SEPTEMBER 10, 2018

PLAYER INFORMATION			
<input type="checkbox"/> RETURNING (I HAVE PLAYED IN THE WHL BEFORE)			
<input type="checkbox"/> NEWBIE (I HAVE NEVER EVER PLAYED IN THE WHL BEFORE...EVER)			
Name:		Date of Birth:	MM / DD / YY
Provide a Phone Number and Email Address where your team captain can reach you			
Preferred Phone #:		Other Really Important #:	
Preferred Email Address:			
LEAGUE INFORMATION			
*NEWBIES ONLY Please register me with: _____ (One Name Only)			
*NOTE: All Newbies are REQUIRED to attend at least ONE DRAFT GAME in September.			
MIDDLE LEAGUE – 19 & Over – No Slap Shots – Faster Pace, Experienced Players			
PLAYER <input type="checkbox"/>	Forward <input type="checkbox"/>	Defense <input type="checkbox"/>	Doesn't Matter <input type="checkbox"/>
GOALIE <input type="checkbox"/>	*Must have your own goalie gear		

PAYMENT INFORMATION	
GOALIE	<input type="checkbox"/> Free (Before Sept 1)
GOALIE	<input type="checkbox"/> \$200 (After Sept 1)
EARLY REGISTRATION	<input type="checkbox"/> \$300 (Before July 16)
REGULAR REGISTRATION	<input type="checkbox"/> \$375 (July 16–Aug 31)
LAST MINUTE REGISTRATION	<input type="checkbox"/> \$450 (Sept 1–10)
YOU ARE NOT CONSIDERED REGISTERED UNTIL PAYMENT IS RECEIVED IN FULL	
<input type="checkbox"/> E-Transfer (Email payment to): whlregister@gmail.com	
<input type="checkbox"/> Cheque OR <input type="checkbox"/> Money Order (Payable to WOMEN'S HOCKEY LEAGUE) NO POST-DATED CHEQUES DO NOT MAIL CASH PAYMENTS (Contact whlregister@gmail.com to make other payment arrangements)	
ON-LINE REGISTRATION 1. Indicate E-Transfer above and make your payment online. 2. Type your information on this form and save this form to your computer. 3. Attach & send your saved form in an email to WHL Registrar Lisa Dale: whlregister@gmail.com	THE OLD-FASHIONED WAY 1. Type or handwrite your information on this form. 2. Mail the form and your payment to: Women's Hockey League c/o Lisa Dale, 102 Laronde Avenue Sault Ste. Marie, ON. P6B 5R6

REGISTRAR'S USE ONLY (LEAVE THIS AREA BLANK)				
Date Received	<input type="checkbox"/> E-Transfer	<input type="checkbox"/> Cheque	<input type="checkbox"/> Money Order	<input type="checkbox"/> Cash
#	#	#	#	