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REGISTRATION FORM 2009

Please print clearly and MAIL or FAX completed form.
MEDICAL INFORMATION ON REVERSE SIDE

FOR OFFICE USE
Camper ID #

Register by February 1, 2009 and receive a FREE 1-Year subscription
to The Hockey News. Visit our website for complete details.

The Hockey News
EARLY BIRD SPECIAL

CAMPER INFORMATION ALL DOCUMENTATION WILL BE MAILED TO CAMPER ADDRESS UNLESS INFORMED OTHERWISE

FIRST NAME	LAST NAME	DATE OF BIRTH MM / DD / YY	HEIGHT IE: 4' 11"	WEIGHT POUNDS
ADDRESS		CITY	PROV / STATE	COUNTRY
EMAIL		SCHOOL	GRADE	HOME PHONE
		GENDER	AGE	
		<input type="checkbox"/> M <input type="checkbox"/> F		

CAMP SESSIONS	PRICING			SKILL LEVEL																																											
<p>CLEARLY mark all requested sessions. All charges are PRE-TAX and are in Canadian Funds. U.S. checks will be honoured 'at par'. Residential programs are subject to: PST (3%) and GST (5%).</p> <p>EARLY BIRD DISCOUNTS: 5% (Deposit by Dec. 31, 2008) 10% (Paid in Full by Dec. 31, 2008)</p> <p>CAMPERS</p> <p><input type="checkbox"/> TEAM PLAY & SKILLS DEVELOPMENT 1 (July 5 - 10) <input type="checkbox"/> TEAM PLAY & SKILLS DEVELOPMENT 2 (July 12 - 17) <input type="checkbox"/> SKILLS 1 & 2 'COMBO' (BOTH weeks) <input type="checkbox"/> ELITE TRAINING & CONDITIONING 1 (July 19 - 24) <input type="checkbox"/> ELITE TRAINING & CONDITIONING 2 (July 26 - 31) <input type="checkbox"/> ELITE 1 & 2 'COMBO' (BOTH weeks) <input type="checkbox"/> SKILLS & ELITE 'COMBO' (ALL 4 Residential weeks) <input type="checkbox"/> DAY CAMP (August 3 - 7) <input type="checkbox"/> JR. & COLLEGE PREP CAMP (August 2 - 6) EARLY PM <input type="checkbox"/> PRO DEVELOPMENT CAMP (Dates TBA) <input type="checkbox"/> ADULT SKILLS CAMP [1 WEEK] (August 2 - 6) PM <input type="checkbox"/> ADULT SKILLS CAMP [4 WEEKS] (July 5 - 31) PM</p> <p>TEAM WEEK: PLEASE INDICATE WEEK <input type="checkbox"/> August 10 - 14 <input type="checkbox"/> August 17 - 21 <input type="checkbox"/> August 24 - 28)</p> <p>COUNSELLOR IN TRAINING (CIT)</p> <p><input type="checkbox"/> SKILLS PROGRAM (2 week program: July 5 - 17) <input type="checkbox"/> ELITE PROGRAM (2 week program: July 19 - 31) <input type="checkbox"/> SKILLS & ELITE PROGRAMS (ALL 4 Residential weeks) <input type="checkbox"/> DAY CAMP (August 3 - 7) <input type="checkbox"/> SKILLS, ELITE & DAY CAMP PROGRAMS (ALL 5 weeks)</p>	<table border="1"> <tr> <th>DEPOSIT RECEIVED BY</th> <th>PAID IN FULL BY</th> <th>FULL PRICE AFTER</th> </tr> <tr> <td>Dec. 31 2008</td> <td>Dec. 31 2008</td> <td>Dec. 31 2008</td> </tr> <tr> <td>CAD \$903</td> <td>CAD \$855</td> <td>CAD \$950</td> </tr> <tr> <td>\$903</td> <td>\$855</td> <td>\$950</td> </tr> <tr> <td>\$1,615</td> <td>\$1,530</td> <td>\$1,700</td> </tr> <tr> <td>\$1,093</td> <td>\$1,035</td> <td>\$1,150</td> </tr> <tr> <td>\$1,093</td> <td>\$1,035</td> <td>\$1,150</td> </tr> <tr> <td>\$1,995</td> <td>\$1,890</td> <td>\$2,100</td> </tr> <tr> <td>\$3,515</td> <td>\$3,330</td> <td>\$3,700</td> </tr> <tr> <td>\$470</td> <td>\$446</td> <td>\$495</td> </tr> <tr> <td>\$375</td> <td>\$356</td> <td>\$395</td> </tr> <tr> <td>TBA</td> <td>TBA</td> <td>TBA</td> </tr> <tr> <td>\$280</td> <td>\$266</td> <td>\$295</td> </tr> <tr> <td>\$375</td> <td>\$356</td> <td>\$395</td> </tr> <tr> <td>\$356/Member</td> <td>\$338/Member</td> <td>\$375/Member</td> </tr> </table>	DEPOSIT RECEIVED BY	PAID IN FULL BY	FULL PRICE AFTER	Dec. 31 2008	Dec. 31 2008	Dec. 31 2008	CAD \$903	CAD \$855	CAD \$950	\$903	\$855	\$950	\$1,615	\$1,530	\$1,700	\$1,093	\$1,035	\$1,150	\$1,093	\$1,035	\$1,150	\$1,995	\$1,890	\$2,100	\$3,515	\$3,330	\$3,700	\$470	\$446	\$495	\$375	\$356	\$395	TBA	TBA	TBA	\$280	\$266	\$295	\$375	\$356	\$395	\$356/Member	\$338/Member	\$375/Member	<p><input type="checkbox"/> OTHER Specify: _____</p> <p><input type="checkbox"/> COLLEGE / UNIVERSITY</p> <p><input type="checkbox"/> JUNIOR (MAJOR A / JR. A / B / C)</p> <p><input type="checkbox"/> ADULT REC. Division: _____</p> <p><input type="checkbox"/> AA / AAA</p> <p><input type="checkbox"/> REP / TRAVEL / A</p> <p><input type="checkbox"/> HOUSE LEAGUE</p> <p><input type="checkbox"/> INEXPERIENCED</p>
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<p>POSITION SELECT ONLY ONE</p> <p><input type="checkbox"/> LW <input type="checkbox"/> C <input type="checkbox"/> RW <input type="checkbox"/> LD <input type="checkbox"/> RD <input type="checkbox"/> G</p> <p>GOALTENDER VERIFICATION: YES? (PLEASE CIRCLE)</p>																																															
<p>TEAM AFFILIATION</p> <p>CURRENT TEAM:</p>																																															
<p>TEAMMATE REQUEST</p> <p>1) _____ 2) _____</p> <p>RNHC ATTEMPTS TO HONOUR ALL REQUESTS, BUT RESERVES THE RIGHT TO ASSIGN CAMPERS IN THE BEST INTERESTS OF THE PROGRAM.</p>																																															
<p>ADDITIONAL INFORMATION</p> <p>ARE YOU A PREVIOUS RNHC CAMPER? <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>IF NO, HOW DID YOU HEAR ABOUT RNHC?</p>																																															
<p>EMERGENCY CONTACT OTHER THAN PARENTS</p> <p>NAME:</p> <p>RELATIONSHIP TO CAMPER: PHONE:</p>																																															

FAMILY INFORMATION PLEASE ATTACH ADDRESS DETAILS IF DIFFERENT FROM ABOVE

FATHER	FIRST NAME	LAST NAME	HOME PHONE	WORK PHONE
	CELL / PAGER	FAX	SUMMER PHONE	EMAIL
MOTHER	FIRST NAME	LAST NAME	HOME PHONE	WORK PHONE
	CELL / PAGER	FAX	SUMMER PHONE	EMAIL
STATUS	<input type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> SINGLE FATHER <input type="checkbox"/> SINGLE MOTHER <input type="checkbox"/> OTHER			IF OTHER, PLEASE SPECIFY:
CUSTODY	<input type="checkbox"/> JOINT <input type="checkbox"/> FATHER <input type="checkbox"/> MOTHER <input type="checkbox"/> GRANDPARENTS <input type="checkbox"/> GUARDIAN(S) <input type="checkbox"/> OTHER			IF OTHER, PLEASE SPECIFY:

PAYMENT INFORMATION

DEPOSIT: Applications will not be considered unless accompanied by a minimum of **\$400** (Residential) or **\$200** (Day Camp, Junior Prep, Pro & Adult Camp) **non-refundable deposit** per camper / per week. Deposits are payable by **Cheque, Visa or MasterCard** (ALL Credit Cards will be charged in Canadian Funds). Cheques should be made out to **Roger Neilson's Hockey Camp**. U.S. checks will be honoured 'at par'. Fax, E-mail and verbal (phone) applications will only be processed when a valid credit card number is provided. Upon receipt of your application / deposit, additional registration material and Camp information will be mailed.

BALANCE DUE: Credit Card payments will be processed **automatically** on May 1, 2009 using the same information as below **unless** indicated otherwise with this application. If registering after May 1st, full payment is required at time of registration. No personal cheques will be accepted past June 1, 2009 - Money Orders or Certified Cheques only.

DEPOSIT AMOUNT	DEPOSIT TYPE	FINAL PAYMENTS ARE DUE
	<input type="checkbox"/> CHEQUE <input type="checkbox"/> VISA <input type="checkbox"/> MC	ON/OR BEFORE MAY 1, 2009.
CARD NUMBER	EXPIRY DATE MM / YY	
	/	
CARD HOLDER	SIGNATURE	

TERMS & CONDITIONS PARTIAL

There is a cancellation fee of **\$400** (Residential) or **\$200** (Day Camp, Junior Prep, Pro & Adult Camp) for each week cancelled before May 1, 2008. Cancellations will forfeit their subscriptions to The Hockey News. There are **NO** refunds after May 1st except for medical reasons. In such cases, a Doctor's certificate is required - and the cancellation fee will be kept 'on account' for use in the following Camp season.

The Camp Director reserves the right to dismiss a camper when it is determined to be in the best interests of the child and / or Camp. There are **NO** refunds for participants dismissed by the Camp.

Complete Terms & Conditions can be found via the Registration Info page on the Camp website. In signing this application, you are authorizing RNHC to use your child's photograph in publicity and news releases (including brochures, advertising in print and electronic format) at its discretion. You are also certifying that the applicant is in good physical and mental health and that you have read and understood the conditions of this application and agree to abide by the terms.

I understand that Roger Neilson's Hockey Camp (RNHC) will provide necessary and appropriate supervision of my child. I give my approval to my child's participation in all activities of the RNHC and assume all risks and hazards incidental to such participation and do waive, release, absolve, indemnify and agree to hold harmless RNHC, its officers, agents or employees.

PARENT / GUARDIAN(S) SIGNATURE	DATE
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PLEASE COMPLETE MEDICAL FORM ON THE REVERSE SIDE →