



MUNICIPALITY OF COLCHESTER  
WOMEN'S 4 ON 4 HOCKEY LEAGUE  
2020/2021 REGISTRATION



**Rates: Cost TBA Goalies: TBA**  
**\*Covid-19 Rules & Restrictions will apply\***

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

PHONE #'S HOME: \_\_\_\_\_ WORK: \_\_\_\_\_ CELL: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

(Please print clearly and be specific with dash, underscore and periods).

EMERGENCY CONTACT: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Did you participate in the Babes on Blades program? YES \_\_\_ NO \_\_\_

Did you participate in the 2019/2020 - 4 on 4 league? YES \_\_\_ NO \_\_\_

What position do you play? Offense \_\_\_\_\_ Defense \_\_\_\_\_ Either \_\_\_\_\_ Goalie \_\_\_\_\_

Would you be interested in trying to play Goalie? YES \_\_\_ NO \_\_\_

*Players must be 19 years of age. Goalies may join the league at age 16.*

PLEASE OUTLINE ANY OTHER PRIOR HOCKEY EXPERIENCE YOU MAY HAVE:

---

---

**DISCLAIMER**

I acknowledge that there are risks associated with exercise and agree to assume legal responsibility for injuries or death caused by exercise associated with the Women's 4 on 4 hockey league. Neither I nor my estate will make a claim against the Municipality of the County of Colchester or event/activity organizers even if their negligence caused or contributed to my injuries or death.

Please Note: Due to insurance reasons, pregnant women are NOT permitted to participate in the 4 on 4 hockey league.

**Tentatively the season may resume November 1st or the 8th depending on Covid-19**

NAME: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_