



# 2009 REGISTRATION FORM

## PLAYER INFORMATION:

Last Name:		First Name:	
Street Address:			City:
Postal Code:	Home #: ( )	Email:	
Birth Date (MM/DD/YYYY):	Birth Certificate #:	# of Years Playing Lacrosse:	
Emergency Contact & Relationship:			Tel #: ( )

**\* Photocopy of birth certificate must accompany registrations for new players.**

Father's Name:	Tel #: ( )
Mother's Name:	Tel #: ( )

## REGISTRATION:

Division	Birth Year	Registration Fee	Sub-Total
<input type="checkbox"/> Junior Paperweight	2005, 2006	\$75 (before 3/31) \$85 (after 4/1)	\$
<input type="checkbox"/> Senior Paperweight	2003, 2004	\$100 (before 3/31) \$110 (after 4/1)	\$
<input type="checkbox"/> Tyke	2001, 2002	\$120 (before 3/31) \$130 (after 4/1)	\$
<input type="checkbox"/> Novice	1999, 2000	\$165 (before 3/31) \$175 (after 4/1)	\$
<input type="checkbox"/> Peewee	1997, 1998	\$165 (before 3/31) \$175 (after 4/1)	\$
<input type="checkbox"/> Bantam	1995, 1996	\$165 (before 3/31) \$175 (after 4/1)	\$
<input type="checkbox"/> Midget	1993, 1994	\$165 (before 3/31) \$175 (after 4/1)	\$
<input type="checkbox"/> Intermediate	1988, 1989, 1990, 1991, 1992	\$200 (before 3/31) \$210 (after 4/1)	\$

### FAMILY PLAN

All parents with more than TWO children registered in the KLA may register the FIRST TWO children at FULL price and the THIRD and remaining children receive a **\$25 discount each**.  
Please list name(s) and division(s) of children included in the family plan below:

Name: \_\_\_\_\_ Division: \_\_\_\_\_

Name: \_\_\_\_\_ Division: \_\_\_\_\_

Name: \_\_\_\_\_ Division: \_\_\_\_\_

Name: \_\_\_\_\_ Division: \_\_\_\_\_

Name: \_\_\_\_\_ Division: \_\_\_\_\_

**MINUS**  
\$

**TOTAL OWING**

\$

## PAYMENT:

Please select one:

<input type="checkbox"/> Cash <input type="checkbox"/> Cheque <input type="checkbox"/> Interac (in person only) <input type="checkbox"/> Money Order	<b>CREDIT CARD PAYMENTS</b>		
	<input type="checkbox"/> MasterCard <input type="checkbox"/> VISA	Card no.	Expiry Date / /
	Name on Card	Signature	Date (MM/DD/YYYY) / /

# 2009 REGISTRATION FORM

**CANCELLATION DETAILS:**

Cancellation	Details of Refund
Before April 13, 2009	Full Refund of Registration Fee
After April 13, 2009	Refund of Registration Fee minus \$25 admin fee
After May 1, 2009	No Refunds

**PARENTAL CLAUSE:**

It is understood and agreed that the club and/or Association and/or its officials, coaches, affiliates or sponsors do not assume any responsibility for any injury, damage or loss resulting from any accident, any unknown condition, handicap or infection, however so caused.

Parent's Signature:	Name (Please Print):	Date:
---------------------	----------------------	-------

**VOLUNTEERS:**

The KLA is a not-for-profit organization that is run by the generosity of volunteers. If you are interested in volunteering your time, please indicate below. A KLA representative will contact you.

Contact Name:	Email:	Phone #:
<i>I would like to volunteer in the following area(s):</i> <input type="checkbox"/> Coaching (Head or Assistant) <input type="checkbox"/> Trainer <input type="checkbox"/> Team Manager <input type="checkbox"/> Registration <input type="checkbox"/> Sponsorship <input type="checkbox"/> Fundraising <input type="checkbox"/> Tournament <input type="checkbox"/> Junior <input type="checkbox"/> Other, please indicate where/what:		

**2009 REFERRAL REWARD PROGRAM:**

If you are a new player to the KLA and someone has referred you for registration, please indicate their name and division below. A 'new player registration' is classed as a person who has **never been registered with the KLA.**

Name of Person Who Referred: \_\_\_\_\_ Division: \_\_\_\_\_

**FOR ASSOCIATION USE ONLY**

DATE RECEIVED / /	PAYMENT AMOUNT REC'D \$	PAYMENT METHOD <input type="checkbox"/> Cash <input type="checkbox"/> Cheq/M.O. # _____ <input type="checkbox"/> Interac <input type="checkbox"/> MasterCard <input type="checkbox"/> VISA
CREDIT APPROVAL	RECEIVED BY (INITIAL)	REGISTRATION METHOD: <input type="checkbox"/> In Person <input type="checkbox"/> Mailed in OLA FORM COMPLETED: <input type="checkbox"/> Yes <input type="checkbox"/> No

\* Interac and credit card receipts to be stapled to registration form.