



## 2024 - 2025 Player Registration Certificate

Man  Woman  Non-Binary  Prefer not to say

<b>Last name</b>		<b>First Name</b>		<b>Date of Birth (mm/dd/yyyy):</b>		<b>Birth Country:</b>		
<b>Address</b>			<b>City</b>		<b>Province</b>		<b>Postal Code</b>	
<b>Telephone No.</b>				<b>Email:</b>				
<b>What year did you move into your current residence:</b>				<b>Primary Language:</b> <input type="checkbox"/> English <input type="checkbox"/> French		<b>Secondary Language:</b> <input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> N/A		
<b>Citizenship:</b>				<b>Identify as Indigenous:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Prefer not to say		<b>If yes, please indicate the group:</b>		
<b>Ethnicity:</b> <input type="checkbox"/> Black <input type="checkbox"/> Caucasian <input type="checkbox"/> Filipino <input type="checkbox"/> Indigenous <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Latin American <input type="checkbox"/> Southeast Asian <input type="checkbox"/> South Asian/East Indian <input type="checkbox"/> West Asian, North African or Arab <input type="checkbox"/> Other <input type="checkbox"/> Prefer not to say								
Is eligible to play for the _____						<input type="checkbox"/> Player <input type="checkbox"/> Goaltender		
<b>I last registered with the following Team(s)</b>								
YEAR: _____		TEAM: _____		In the _____		Branch/Province		
YEAR: _____		TEAM: _____		In the _____		Branch/Province		
<p>Hockey Canada does not sell, trade, or otherwise share the information we collect outside our Members and Associations. However, we may from time to time use this information for the purposes of offering additional services, promotions, including promotions offered by third parties, and/or hockey specific research. This type of usage of your personal information by Hockey Canada, its Members, and/or associations is entirely at your discretion. Should you choose to allow this type of usage please check the box below.</p> <p>I certify the information provided to be true and in consideration of the granting of this registration to me with the privileges incident thereto, and by registering I have become subject to the rules, regulations and decisions of Hockey Canada, its Board of Directors, its Members and/or associations which may be restrictive in some areas such as movement from team to team, conduct etc. and I agree to abide by such rules, regulations and decisions of Hockey Canada, its Board of Directors, its Members and/or associations. Further, the information to be provided is required by Hockey Canada to facilitate hockey programs on behalf of the registrant and Hockey Canada. Hockey Canada will treat this personal information with the utmost respect and in accordance with the Hockey Canada Privacy Policy at all times.</p> <p>The information above is collected for all registered participants and is required by Hockey Manitoba (it's employees, team officials, volunteers, leagues, and associations) to facilitate its hockey programs and to administer the rules that govern sanctioned events. Hockey Manitoba treats this information with the utmost respect and in accordance with the Hockey Manitoba Privacy Policy at all times. For further information on Hockey Manitoba's Privacy Policy, please visit our website at <a href="http://www.hockeymanitoba.ca">www.hockeymanitoba.ca</a>.</p>								
Date Signed _____				Player's Signature _____				
Date Signed _____				Branch Approval _____				
This card is issued at the discretion of the Branch Executive, and is revocable without notice								