

## Ringette Ontario Registration Form

NAME OF HOME ASSOCIATION	ASSOC. NO.	NEW	OVER 18
SURNAME	GIVEN NAME		SEX
STREET ADDRESS		APT. NO.	
TOWN/CITY	PROVINCE		POSTAL CODE
AREA	TELEPHONE	E-MAIL	BIRTHDATE (MM/DD/YY)

**ASSOCIATION REGISTRAR USE ONLY:**

I, the undersigned (registrant or legal parent/guardian), in registering with the Ontario Ringette Association as a Registered Participant, agree to abide and be governed by all prescribed by-laws, rules, regulations, policies, principles and philosophies as outlined in the Corporation's Operating Manual, posted on the ORA website [www.ontario-ringette.com](http://www.ontario-ringette.com).

AGE VERIFIED BY:

NAME (Print): \_\_\_\_\_ Applicant or Parent/Guardian Consent Date \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_

Revised August 2018

Ontario Ringette Association – 912-305 Milner Ave, Scarborough, ON M1B 3V4 M-F-15

**\*\* PLAYERS IN THE U6 TO U19 AGE GROUPS MUST REGISTER THROUGH AN ASSOCIATION\*\***

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