

# 2021-22 SMS Hockey Class Student Registration Form

This form will be used to gather data for the purpose of the hockey exploration class at Shuswap Middle School.

\* Required

## SMS HOCKEY EXPLORATION



1. STUDENT NAME \*

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2. BIRTHDATE \*

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*Example: January 7, 2019*

3. GENDER \*

*Mark only one oval.*

Female

Male

4. Please choose your current position \*

*Mark only one oval.*

forward

defence

goalie

## 5. Current Hockey Team \*

Please describe the current level of play your child will be playing in September (example: U-13 recreation, U- 13 rep, U -15 Regional zone, U-13 female rep, etc)

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## 6. Please write the name of the current Hockey association you are registered with or will be registering with in the fall. \*

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### HOCKEY CLASS STUDENT/PARENT CONTRACT

**\*PLEASE READ CAREFULLY\*** Both the student and parents are responsible for completion of this section and the understanding of the expectations in this class. \*Parents will be notified of repeated failure to adhere to the mentioned guidelines. After collective parent, administration, and teacher communication and intervention is attempted, suspension from the program may be implemented, (with no refund of money), and alternate programming in this class will be provided\* **BY CHECKING THE BOXES BELOW YOU ARE AGREEING TO COMMIT TO THE HOCKEY EXPLORATION AND THE EXPECTATIONS OUTLINED BELOW\***

## 7. STUDENT ATHLETE COMMITMENT CONTRACT \*

Parent/Guardian please read the following expectations with your child who is chasing this program. As a student/athlete in this hockey exploration I will:

*Check all that apply.*

- A. Perform to the best of my abilities in all my classes, which include on and off ice hockey exploration classes
- B. Attend all of my classes unless I have a serious reason for absence.
- C. Be on time for all of my classes
- D. Abide by all school rules and its Code of Conduct.
- E. Display positive and encouraging language and behavior on ice and off ice and at the arena, in the community, and at school.
- F. Wear Hockey Canada/CSA sanctioned equipment and dress in full hockey gear.

## 8. STUDENT NAME \*

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## 9. PARENT COMMITMENT CONTRACT \*

\*PLEASE READ CAREFULLY\* BY CHECKING YES BELOW YOU ARE AGREEING THAT YOU ARE AWARE OF THE COMMITMENT LEVEL NEEDED FOR SUCCESS IN THIS CLASS. YOU HAVE READ THE STUDENT COMMITMENT EXPECTATIONS FOR YOUR CHILD ABOVE AND ENDORSE THE PARTICIPATION OF YOUR CHILD IN THIS HOCKEY EXPLORATION CLASS:

*Check all that apply.*

YES, I have read the student commitment expectations for my child.

I also acknowledge that it is my parent/guardian responsibility to ensure my child's equipment is transported to and from the arena and or school for participation in the class

## 10. PARENT NAME \*

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