

**Bridgman Floor Hockey  
2021 - 2022 Registration Form  
Registration: November 15, 2021 – December 11, 2021**

**Cost is \$40.00 per child**

**Circle Your Division:**    Minors – Grades 1 – 2                      Majors – Grades 3 – 5                      Seniors – Grades 6 – 8

**Game Days:**        Sundays, January 16 – March 20  
**Practice:**           Practices will rotate each week due to limited gym time (date and time TBD), beginning Week of January 11  
Return this form, along with your fee, **NO LATER THAN DECEMBER 11<sup>th</sup>**, to:

**Bridgman Floor Hockey**  
3705 Michigan Ave  
Bridgman, MI 49106  
Make checks payable to: **BRIDGMAN FLOOR HOCKEY**

**Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Boy: \_\_\_ Girl: \_\_\_**

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Text: Yes: \_\_\_\_\_ No: \_\_\_\_\_**

**School Attending:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Did you play last year?**    Yes: \_\_\_ No: \_\_\_\_\_ **Team Name or Coach:** \_\_\_\_\_

**Do you have siblings playing?**    Yes: \_\_\_ No: \_\_\_ **Name(s):** \_\_\_\_\_

**T-shirt Size:**        Youth Small    Youth Medium    Youth Large    Adult Small    Adult Medium    Adult Large    Adult XL

**Yes, I want to volunteer:**        Coach    Assistant Coach    Concessions (at least once during the season)    None (\$25 opt out fee required)

**Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Yes, I want to sponsor a team for \$100:** **Name:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Please list any physical limitations (allergies, hearing, sight, asthma, etc.). Also, list any conflicts regarding practice evenings.**

**\*\* No special requests accepted for same teams \*\***

**PARENTAL WAIVER AND CONSENT**

As a parent or legal guardian of the child named above, I hereby give my full consent and approval for my child to participate as a team member on the Bridgman Floor Hockey League. I understand that there are certain risks of injury inherent in the practice and play of this sport, as well as in traveling and other related activities incidental to my child's participation, and I am willing to assume these risks on behalf of my child. I hereby certify that my child is healthy and has no physical or mental disabilities or infirmities that would restrict full participation in this activity, except as listed above. In addition, I hereby waive, release and hold harmless the organization list above, its officers, coaches, sponsors, supervisors and representatives for any injury that may be suffered by my child in the normal course of participation in the Bridgman Floor Hockey League and the activities incidental thereto.

**\*\*Parents and players are reminded that our referees are human. Under no circumstances will the Bridgman Floor Hockey League tolerate any type of spectator disrespect to our referees.**

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**OFFICE USE ONLY**

**Amount Paid:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Cash:** \_\_\_\_\_

**Check:** \_\_\_\_\_