2018 Camp Hill Field Hockey Club Registration

You are tentatively registering a player with the Camp Hill Field Hockey Club. The Club is appropriate for both novice and skilled players in K through 7th grade. Participation in the Club is open to both boys and girls. In order to finalize your player’s registration, you must complete the Central PA Youth Field Hockey League player waiver form and return it with a check for $100 payable to Camp Hill Field Hockey Club by July 23rd. Waivers and payment can be dropped off at 1702 Lincoln Dr., Camp Hill, PA 17011. Information about the practice schedule will be sent later this summer – we will practice once a week. Practice will start mid-August. Games are on Sunday afternoons and will likely start late August or early September.

Player Name:

Player Birthday:

Player Age Group:

U9 (less than 9 years old as of 9/1/2018)

U11 (less than 11 years old as of 9/1/2018)

U13 (less than 13 years old as of 9/1/2018)

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| School District in which your player resides (Preference will be given to Camp Hill School District Students if a team exceeds the 80/20 split required by the league)  Camp Hill  Other  Did you play for Camp Hill Field Hockey Club in 2017?  Yes  No  If you played in 2017, would you like your player to reuse his/her uniform from last year?  Yes  No  Not applicable (new this year)  If reusing your uniform from last year, what is your number?  Shirt Size (if your player needs a new uniform this year)  Youth Small  Youth Medium  Youth Large  Adult Small  Adult Medium  Adult Large  Parent or Guardian 1 Name:  Parent or Guardian 1 Email Address:  Parent or Guardian 1 Cell Phone Number:  Parent or Guardian 2 Name:  Parent or Guardian 2 Email Address:  Parent or Guardian 2 Cell Phone Number:  Emergency Contact Name:  Emergency Contact Cell Phone Number:  Known Allergies or Medical Conditions:  Does your player have Field Hockey Experience?  Yes  No  Preferred Position  Offense  Mid-Field  Defense  Goalie  Any position that best fits  Would you or someone in your family be interested in helping to coach?  Yes  No  This is to confirm that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, born \_\_\_\_\_\_\_\_\_\_\_\_\_\_ has my permission to participate in the Camp Hill Field Hockey Club. It is understood that Camp Hill Field Hockey Club, CPYFHL, Julie Reibsane and her staff are not legally responsible for injury to any participant in this program.  Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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