

**RUGBY AMATEUR HOCKEY ASSOCIATION (RAHA)
2007-2008 REGISTRATION**

Players Name (exactly as listed on birth cert) _____

DOB: _____ **Age (as of July 1, 2007)** _____

Address: _____

Parent(s) _____

Home Phone _____ **Work Phone** _____ **Cell Phone** _____

Email: **Parent** _____ **Player** _____
(address(s) you would like to receive RAHA information at)

Group	Mini-Mite/Mite	Date of Birth	Fee	Insurance	Total
		7/1/98 & Younger	\$15	\$40	\$55
	Squirt	7/1/96-6/30/98	\$35	\$40	\$75
	PeeWee	7/1/94-6/30/96	\$90	\$40	\$130
	Bantam	7/1/92-6/30/94	\$140	\$40	\$180
	Jr. Gold	7/1/88-6/30/92	\$190	\$40	\$230
	Girls Rec	7/1/96-7/1/88	\$15	\$40	\$55

Total Due \$ _____
Amount Paid \$ _____
Balance Due \$ _____

RAFFLE TICKETS & CALENDARS FOR YOUTH

Raffle Tickets _____
Caleendars for Youth _____

Numbers

Date Due
December 31, 2007
December 31, 2007

___ I agree to sell the above raffle tickets and caleendars for youth. I agree to return the sold tickets and all proceeds by the due date listed above. I agree to pay for any lost raffle tickets or caleendars for youth. I agree to pay for any unsold raffle tickets or caleendars for youth. Payment is due by the due date listed above. If my payments are delinquent, my child will not be able to participate in any hockey activities until the payments are made.

___ I elect to not participate in the above fundraisers. I agree to pay an additional \$150 due at registration. My child will not be able to participate in any hockey activities until the payment is made.

_____ Date _____ Parent/Guardian Signature

PAYMENT SCHEDULE

I would like to make: two three payments (circle one)
FIRST PAYMENT due at Registration: \$ _____
SECOND PAYMENT due on or before 12/1/07 \$ _____
THIRD PAYMENT due on or before 1/1/08 \$ _____

I agree to the above payment schedule. I agree to make the above payments on time. If a payment is delinquent, my child will not be allowed to participate in any hockey activities until the payment is made. I agree to pay a late fee of \$10 per late payment.

_____ Date _____ Parent/Guardian Signature