

PLAYER REGISTRATION FOR 2025/2026 SEASON

Player Registration forms must be submitted by **October 4, 2025** **Registration fees are \$50 payable via e-transfer to cphltreasurer@powerhockey.ca or by cheque**

Successful registration is contingent upon meeting eligibility and safety criteria specified by the Calgary PowerHockey League Mission Statement.

Section 1: Contact & Personal Information

Full Name: _____ Street: _____

City/Town: _____ Postal Code: _____ Telephone: _____

E-mail address _____ Date of Birth: _____

E-mail address #2 _____

Birthplace: _____

Emergency Contact #1: _____ Telephone #1: _____

Emergency Contact #2: _____ Telephone #2: _____

Section 2: Disability Information

What is your primary disability?

Do you have any visual Impairments? Yes ___ No ___ If Yes, explain: _____

Do you have any hearing Impairments? Yes ___ No ___ If Yes, explain: _____

Do you have any cognitive Impairments? Yes ___ No ___ If Yes, explain: _____

Section 3: Additional Player Information

Do you play with your stick attached to your wheelchair?

Yes _____ No _____

Are you willing to be a goaltender for an entire season?

Yes _____ No _____

Section 4: Legal Guardian

Do you have a legal guardian?

If Yes, please provide their phone number or email:

Yes _____ No _____

Section 5: NEW PLAYERS ONLY

If you were referred to the CPHL by a current player, please tell us which player.

Player: _____

Section 6: Consent and Waiver/Release of Liability

I am aware of the risks involved in participating in wheelchair hockey, and I accept those risks. In consideration for being permitted to take part in the games, tournaments and events of the Calgary PowerHockey League ("CPHL"), I agree to release, save harmless and indemnify the CPHL, its board members, organizers, agents, officials, servants, employees and representatives from and against all claims, actions, costs, expenses and demands in respect of death, injury, loss or damage to my person or property, howsoever caused, arising out of or in connection with my taking part in the games, tournaments or events of the CPHL, notwithstanding that such injury, loss or damage may have occurred or been contributed to by the negligence of the CPHL, its board members, organizers, agents, officials, servants, employees, representatives or any of them.

In the interest of providing a safe and secure environment for all participants I understand that I may be asked to undergo a security clearance check.

I release any and all rights to pictures, filming and media coverage while participating in CPHL events. Participation in said events implies consent.

I agree that this Waiver and Release of Liability shall bind my heir, executors, administrators and assigns.

DATED at _____, this ____ day of _____, 20____.

_____	_____	_____
Participant Name	Guardian Name (if applicable)	Witness Name
_____	_____	_____
Signature	Signature	Signature

Return Completed Registration Forms

To: Jacob McGregor
Via email: Jgmcgreg22@gmail.com

**Or by mail: #404, 1129 23
Avenue NW Calgary, AB
T2M 4P5**

Please make cheques payable to the Calgary PowerHockey League or CPHL. Please note there is a \$20 charge for NSF cheques. Registration fee *Cheques may be post dated to October 31, 2025*