



**DUFFIELD SPORTS CLUB**  
"A HOCKEY TRADITION SINCE 1957"  
WWW.DUFFIELDHOCKEY.CA



**HOUSE LEAGUE REGISTRATION - 2023/2024 SEASON**


House League will run **October 2023** to **March 2024**.

House League cost: Toronto Residents: **\$600**. Non-Toronto Residents: **\$650**.

Payment is required by **Grading Day**. Grading Day and season details will be emailed out in September.

Cash, cheque payable to **Duffield Sports Club** or EMT to [duffieldhockey@rogers.com](mailto:duffieldhockey@rogers.com) is acceptable.

For EMTs, please include player's full name in the EMT note.

**Instructions to fill out this form:** Download the PDF form to your computer. Open the PDF file, click on the  icon at the top left of the screen, click on each line below and type in each response.

When done, save the document and email the completed form to [duffieldhockey@rogers.com](mailto:duffieldhockey@rogers.com).

Player's First Name: \_\_\_\_\_ Player's Last Name: \_\_\_\_\_

Player's Date of Birth (MM/DD/YY): \_\_\_/\_\_\_/\_\_\_\_\_ Birth Registration No.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Hockey Club & Team Name Played in 22/23 Season (if applicable): \_\_\_\_\_ Goalie? (Y/N): \_\_\_\_\_

**Contact Information:**

**Guardian 1:**

Full Name: \_\_\_\_\_ Relationship to Player: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Guardian 2:**

Full Name: \_\_\_\_\_ Relationship to Player: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Form of Payment (Cash/Cheque/EMT): \_\_\_\_\_ If EMT, Date Sent: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_