



2023 HIGH PERFORMANCE HOCKEY CAMP APPLICATION FORM



First Name: _____ **Last Name:** _____

Gender: Female Male **Birthdate:** _____ **Community:** _____

Phone #: _____ **Email:** _____

Medical card #: _____

2022-2023 Level Played: _____ **Coach:** _____

Coach Contact #: _____

Position: _____ **Shoots:** Left Right **Jersey Size:** _____

Short Size: _____ **T-Shirt Size:** _____

Home Address: _____

Community: _____ **Province:** _____ **Postal Code:** _____

Father's Name: _____ **Mother's Name:** _____

Father's Phone #: _____ **Mother's Phone #:** _____

Father's Email: _____ **Mother's Email:** _____

Emergency Contact: _____ **Relationship:** _____

Phone: _____ **Email:** _____

Specify any of your child's health problems: _____

Is your child on any medication? No Yes **If so, please specify:** _____

Allergies: _____

Medical Problems:

Dietary Restrictions:



Photo Release Form for Minor Children

I _____ hereby authorize Twist Conditioning & E.I.S.R.A to publish the photographs taken of me and/or the undersigned minor children, and our names, for use on the E.I.S.R.A website and for display on social media. I release Twist Conditioning & E.I.S.R.A from any expectation of confidentiality for the undersigned minor children and myself and attest that I am the parent or legal guardian of the children listed below and that I have the authority to approve Twist Conditioning & E.I.S.R.A to use their photographs and names. I acknowledge that since participation in publications and websites produced by Twist Conditioning & E.I.S.R.A is voluntary, neither the minor children nor I will receive financial compensation. I further agree that participation in any publication and website produced by Twist Conditioning & E.I.S.R.A confers no rights of ownership whatsoever. I release Twist Conditioning & E.I.S.R.A, its contractors and its employees from liability for any claims by me or any third party in connection with my participation or the participation of the undersigned minor children.

Athlete Signature: _____ Date: _____

Printed Name of Athlete: _____

Parental Signature: _____ Date: _____

Printed Name of Parent: _____

E.I.S.R.A. Staff Signature: _____ Date: _____

Printed Name of E.I.S.R.A. Staff: _____