



Amathole Hockey

Player Registration 2011

Player Information- PLEASE PRINT

Last Name	First Name	Initial	
Street Address	City	Date Of Birth	
Email address (if possible)	Cell: Alternate:	Gender M F	ID Number
Previous Hockey Assoc	Previous Club	Current/New Club	Do you have clearance. Y N N/A

AHA Registration Fee: **R 120.00** per player, to be submitted with this form along with two colour ID photographs of the player. Players must be registered and have a “player card” to play in the league and the making of “player cards” cannot be done instantly, the sooner you register the better.

- **SIGNATURE & WAIVER:**
We hereby acknowledge the authority of South African Hockey Association (SAHA) and the Amathole Hockey Association (AHA), and agree to carry out and abide by the constitution, bylaws, rules and regulations of these associations.
- **EQUIPMENT:**
We at the end of the season covered by this registration, agree to return all equipment (including kit) provided by the AHA in good condition, and, should we fail to do so, we agree that we will be responsible for all costs associated with replacement.
- **RELEASE:**
In consideration of this application to play under the auspices of the Amathole Hockey Association, I do hereby for myself, heirs, executors, administrators and assigns, remise, release and forever discharge SAHA and the AHA, its officers, or anyone acting on their behalf, from all manner of litigation, damage claims, or demands in law or equity which I may have or acquire by reason of personal injury to the player, loss or damage to the property, which may occur during or by reason of participation in the activities of the association.
- **MEDIA RELEASE:**
I agree to allow SAHA and or AHA to use photographs taken for use on the AHA or SAHA Hockey web-site or for other Public Relations purposes, directly relating to Amathole or South African Hockey.

Signature of applicant and in respect of a minor, Parent/Guardian as well please:

Signature _____ Parent: _____ Date _____

Are you interested in doing anything of the following for the AHA:

Coach Asst. Coach Umpiring Team Manager Safety/ Trainer Fund Raise

THIS AHA REGISTRATION FORM TO BE HANDED INTO AMATHOLE HOCKEY OFFICE WITH PHOTOGRAPHS AND “MONEY” (or proof of payment), AS SOON AS POSSIBLE PLEASE.