

**BEETON ATHLETIC ASSOCIATION  
Box 309, Beeton, Ontario L0G 1A0  
2021-2022**

PLAYERS NAME \_\_\_\_\_

MAILING ADDRESS, GREEN SIGN NUMBER, POSTAL CODE  
\_\_\_\_\_

HOME PHONE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

I, \_\_\_\_\_ WILL NOT HOLD THE BEETON ATHLETIC ASSOCIATION OR ANYONE PERTAINING THEREOF TO BE RESPONSIBLE FOR INJURIES OR ACCIDENTS OCCURRING TO THIS PLAYER WHILE TRAVELLING TO, FROM OR DURING A PRACTICE GAME OR BAA FUNCTION.

**I hereby acknowledge that teams need to be balanced in divisions with more than one team, and player movement may be required mid-year.**

**Yes** \_\_\_\_\_

**I HEREBY AGREE TO PAY REGISTRATION IN FULL**

\_\_\_\_\_  
SIGNATURE, (PARENT/GUARDIAN)      DATE      AGE GROUP

**I acknowledge that post dated cheques may not be deposited on the exact date.** \_\_\_\_\_

**Do you grant permission for the BAA to publish any photos of your child**    Y    N

**MIDGETS ONLY:** will be required to purchase their own jersey's (approx. cost home and away \$100) Please indicate your first and second choice of numbers.

OFFICE USE ONLY

AMOUNT ENCLOSED \_\_\_\_\_ CASH \_\_\_\_\_ CHEQUE \_\_\_\_\_

DEPOSIT AMOUNT \_\_\_\_\_ DEPOSIT NUMBER \_\_\_\_\_

DEPOSIT AMOUNT \_\_\_\_\_ DEPOSIT NUMBER \_\_\_\_\_