



Member Profile Information

Registration Date *

First Name *	Last Name *	Primary Email *
Gender Identity * <input type="radio"/> Boy/Man <input type="radio"/> Girl/Woman <input type="radio"/> Prefer not to say <input type="radio"/> Not captured in these options <input type="radio"/> Non-binary	Primary Language <input type="radio"/> English <input type="radio"/> French	Secondary Language <input type="radio"/> English <input type="radio"/> French
Birthdate *	Citizenship *	Birth Country
Identify as Indigenous * <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Prefer not to say	If yes, please indicate the group * <input type="radio"/> First Nations <input type="radio"/> Metis <input type="radio"/> Inuit <input type="radio"/> Prefer not to say <input type="radio"/> Prefer to self-describe	
Race & Ethnicity * <input type="radio"/> Black <input type="radio"/> Caucasian <input type="radio"/> Chinese <input type="radio"/> Filipino <input type="radio"/> Indigenous <input type="radio"/> Japanese <input type="radio"/> Korean <input type="radio"/> Latin American <input type="radio"/> West Asian, North African or Arab <input type="radio"/> South Asian <input type="radio"/> Southeast Asian <input type="radio"/> Multiple Races / Ethnicities <input type="radio"/> Prefer to self-describe <input type="radio"/> Prefer not to say		

Address Information

Address Type * <input type="radio"/> Resident <input type="radio"/> Billet residence	Street Number *	
Address *	Country *	
Rural Route / Postal Office Station *		
City *	Province *	Postal Code *
Phone Number *		
Phone Type * <input type="radio"/> Home <input type="radio"/> Work <input type="radio"/> Cell <input type="radio"/> Fax <input type="radio"/> Pager <input type="radio"/> Office <input type="radio"/> Other	Move In Year *	

Contact Information

Contact Type * <input type="radio"/> Court Appointed Guardian <input type="radio"/> Other <input type="radio"/> Myself <input type="radio"/> Parent		
First Name *	Last Name *	Email *
Phone Number *	Phone Type *	Emergency Contact * <input type="radio"/> Yes <input type="radio"/> No

Why do Hockey Canada and the Member Partners collect demographic information?

The collection of self-identification data is central to equity, diversity, and inclusion efforts. Hockey Canada and the Member Branches are collecting this data to increase our ability to enhance programs, while recognizing and removing barriers. The demographic data being collected through the HCR platform is consistent with how the Government of Canada solicits this information including the options you see of race/ethnicity, language and Indigenous Peoples (all of which provide "Prefer not to say" as an option). There are many factors as to why and how this data is collected: please refer to this Government of Canada website for more information: https://www.ic.gc.ca/eic/site/063.nsf/eng/h_97737.html#1.



Mandatory Waivers

Hockey Canada - Optional Use of Personal Information

Hockey Canada does not sell, trade or otherwise share the personal or contact information we collect outside our Members and Associations. However, we may from time to time use this information for the purposes of offering you additional services, notifying you about promotions (including promotions offered by third parties or sponsors), and/or to conduct hockey specific research. Such communications may come from Hockey Canada, its Members and/or Associations, or may come directly from the third parties/sponsors. This type of usage of your personal or contact information by Hockey Canada, its Members, its Associations and or third parties/sponsors is entirely at your discretion. Should you choose to allow this type of usage, please check the box below.

- I agree
- I disagree

First Name *	Last Name *	Date *
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Hockey Canada - Acknowledgement

I certify the information provided to be true and in consideration of the granting of this registration to me with the privileges incident thereto, and by registering I have become subject to the rules, regulations and decisions of Hockey Canada, its Board of Directors, its Members and/or associations which may be restrictive in some areas such as movement from team to team, conduct etc. and I agree to abide by such rules, regulations and decisions of Hockey Canada, its Board of Directors, its Members and/or associations.

Hockey Canada Use of Registration Data

By filling this form, I consent to the processing by Hockey Canada of the personal information included in the form. I understand that Hockey Canada may also receive information from Members and/or associations related to my membership status and activities related to hockey programs. The information to be provided is required by Hockey Canada to facilitate hockey programs on behalf of the registrant and Hockey Canada and may be shared with service providers assisting Hockey Canada in doing so. Hockey Canada will treat this personal information with the utmost respect and in accordance with the [Hockey Canada Privacy Policy](https://www.hockeycanada.ca/en-ca/corporate/about/privacy-policy) (<https://www.hockeycanada.ca/en-ca/corporate/about/privacy-policy>) at all times, which should be consulted for more information.

- I have read and accept the waiver

First Name *	Last Name *	Date *
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Hockey Canada Concussion Policy Acknowledgement

Hockey Canada recognizes that concussion awareness is fundamental to concussion prevention, recognition and management.

The incidence of concussions can be mitigated by the proper implementation of prevention strategies. Hockey Canada encourages the use of sound education programs and enforcement of the Playing Rules as tools to prevent concussions.

All players, parents/guardians, coaches, trainers, Safety Personnel, team staff and officials are required to review their respective Pre-Season Concussion Education Sheet prior to participating in their first game of the season. In addition, the full Concussion Policy and Protocol are also available for viewing.

You can review these resources via these links:

- [Pre-Season Concussion Education Sheet – Player, Parent / Guardian](#)
- [Pre-Season Concussion Education Sheet – Team Staff](#)
- [Pre-Season Concussion Education Sheet – Officials](#)
- [Concussion Policy](#)
- [Concussion Protocol](#)

Acknowledgement

I confirm that I have reviewed the Hockey Canada Pre-Season Concussion Education Sheet and agree to abide by the Hockey Canada Concussion Policy and Protocol as it relates to my participation in Hockey Canada-sanctioned events.

I confirm

First Name *	Last Name *	Date *
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Rowan's Law

HEO has enacted Rowan's Law (Concussion Safety 2018.S.O 2018 c.1 ("Act") Ontario Regulation 161/19, the Act requires all sport organizations as defined in the Regulation ("Sports Organization") which includes HEO to have a Concussion Code of Conduct. The Concussion Code of Conduct must require participants as set out in the Act, to review the Ontario Government's issue Concussion Awareness Resources on an annual basis.

A participant is subject to a Concussion Code of Conduct for each Sports Organization a participant registers with.

Applicable age appropriate Concussion Awareness Resources are located at www.ontario.ca/concussions

The HEO Concussion Code of Conduct and the appropriate Concussion Awareness must be reviewed before you can register/participate in HEO.

You can review the HEO Concussion Code of Conduct here: <https://www.hockeyeasternontario.ca/safe-sport/rowans-law/>

I agree

I disagree

First Name *	Last Name *	Date *
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Rowan's Law Acknowledgement Form

HEO Rowan's Law Acknowledgement Form

The Ontario Government has enacted Rowan's Law (Concussion Safety), 2018, S.O. 2018, c. 1 ("Act"). Ontario Regulation 161/19, the Act requires all sport organizations as defined in the Regulation ("Sports Organization"), which includes Hockey Eastern Ontario ("HEO"), to have a Concussion Code of Conduct.

This Concussion Code of Conduct must require participants, as set out in the Act, to review the Ontario Government's issued Concussion Awareness Resources on an annual basis. A participant is subject to a Concussion Code of Conduct for each Sports Organization a participant registers with.

The HEO Code of Conduct is located at <http://www.hockeyeasternontario.ca/pages/admin/policies.htm> and the applicable age appropriate Concussion Awareness Resources are located at www.ontario.ca/concussions. The HEO Concussion Code of Conduct and the appropriate Concussion Awareness Resources must be reviewed before you can register/participate in HEO.

- [10 and Under Concussion Awareness Resource](#)
- [11-14 Concussion Awareness Resource](#)
- [15 and Over Concussion Awareness Resource](#)

APPENDIX A

I will help prevent concussions by my commitment to:

- Wearing the proper equipment for my sport and wearing it correctly;
- Respecting the rules of my sport or activity; and
- My commitment to fair play and respect for all* (respecting other athletes, coaches, team trainers and officials). I will care for my and others health and safety by taking concussions seriously, and I understand that:
 - A concussion is a brain injury that can have both short- and long-term effects;
 - A blow to the head, face or neck, or a blow to the body that causes the brain to move around inside the skull may cause a concussion; and
 - A person doesn't need to lose consciousness to have had a concussion. I will commit to:
 - report any possible concussion received during participation in HEO to a designated person;
 - recognizing a concussion or possible concussion and the reporting to a designated person when an individual suspect that another individual may have sustained a concussion;
 - sharing any pertinent information regarding incidents of a removal from sport with the Player's school and other sport organization with which the player has registered;
 - sharing any pertinent information regarding incidents of a concussion that have occurred outside of participation in HEO to a designated person with your/individual's Team;
 - Complete Injury Report Forms in a timely manner and ensure they are submitted to the Member;
 - Give commitment to providing opportunities before and after each training, practice and competition to enable participants to discuss potential issues related to concussions; and
 - Maintain an open dialogue with all athletes and participants (and parents/guardians in cases of minors) about their health and any signs and symptoms of concussion they may experience. I will commit to respect the HEO Removal and Return to Play Protocol by:
 - Understanding that if I have a suspected concussion, I will be removed from sport and that I will not be able to return to training, practice or competition until I undergo a medical assessment by a medical doctor or nurse practitioner and have been medically cleared to return to training, practice or competition;
 - Understanding I will have to be medically cleared by a medical doctor or nurse practitioner before returning to training, practice or competition;
 - Respect the roles and responsibilities of all coaches and health care professionals in Return to Play protocol; and
 - Respond appropriately with Return to Play protocols if a participant is experiencing concussion related symptoms or if you suspect any participant has sustained a concussion.

Acknowledgement of Review

I confirm that I have reviewed the HEO Concussion Code of Conduct (Appendix A) and the appropriate Concussion Awareness Resources and commit to operating within the parameters of the HEO Concussion Code of Conduct under the role which I have registered with the HEO.

I agree

First Name *	Last Name *	Date *
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Fair Play - Parent Pledge

CARLETON PLACE MINOR HOCKEY ASSOCIATION

PARENTS FAIR PLAY PLEDGE

The Carleton Place Minor Hockey Association (CPMHA) Executive, coaching staff, team officials and others involved in minor hockey are community volunteers working together to provide a meaningful recreational program for all players and an atmosphere of fun, fair play and respect for everyone involved.

As a parent or guardian of a Carleton Place Minor Hockey Association (CPMHA) player, you are a member of the Association. Membership in the CPMHA and participation in its programs is a privilege and not a right. As such, the CPMHA recognizes the need to have guidelines for the standard of behaviour expected of all participants and appropriate measures to deal with those instances in which behaviour exhibited is not in the best interest of CPMHA and all concerned. Please take time to review the Fair Play Code for Parents and Guardians.

We expect all parents and guardians of CPMHA players to abide by this Code at all times.

1. I will not force my child to participate in hockey.
2. I will remember that my child plays hockey for his or her enjoyment, not for mine.
3. I will encourage my child to play by the rules and to resolve conflicts without resorting to hostility or violence.
4. I will teach my child that doing one's best is as important as winning so that my child will never feel defeated by the outcome of a game.
5. I will make my child feel like a winner every time by offering praise for competing fairly and trying hard.
6. I will never ridicule or yell at my child for making a mistake or losing a game.
7. I will remember that children learn best by example.
8. I will emphasize skill development and practices and how they benefit my child as a young athlete. I will de-emphasize games and competition in the lower age groups.
9. I will applaud good plays/performances by both my child's team and their opponents.
10. I will support all efforts to remove verbal and physical abuse from children's hockey games.
11. I will remember that my child is part of a team and therefore has a responsibility towards it. I understand that excessive absences for practices and/or games will negatively affect the play on their team and will therefore make every effort to ensure that my child is present for a full season's worth of practices and games.

I agree to abide by the principals of the FAIR PLAY CODE as set by Hockey Canada and supported by CPMHA.

I agree

First Name *	Last Name *	Date *
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Fair Play - Player Pledge

CARLETON PLACE MINOR HOCKEY ASSOCIATION

PLAYERS FAIR PLAY PLEDGE

It is the intention of this to promote fair play and respect for all participants within CPMHA. All players MUST pledge that they will observe the principals of the Fair Play Code before being allowed to participate in hockey.

1. I will play hockey because I want to, not because others or coaches want me to.
2. I will play by the rules of hockey and in the spirit of the game.
3. I will control my temper – fighting or “mouthing off” can spoil the activity for everyone.
4. I will respect my opponents.
5. I will do my best to be a true team player.
6. I will remember that winning isn’t everything – that having fun, improving skills, making friends and doing my best are also important.
7. I will acknowledge all good plays and performances – those of my team and my opponents.
8. I will remember that coaches and officials are there to help me. I will accept their decisions and show them respect.

I agree to abide by the principals of the FAIR PLAY CODE as set by Hockey Canada and supported by CPMHA.

I agree

First Name *	Last Name *	Date *
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Personal Information Disclosure Form

CARLETON PLACE MINOR HOCKEY ASSOCIATION

PERSONAL INFORMATION DISCLOSURE FORM

Part 1

In accordance with the Ontario Not-for-Profit Corporations Act, 2010 (ONCA), and the Hockey Canada Privacy Policy, I hereby authorize the Carleton Place Minor Hockey Association (CPMHA) to collect, use, and disclose my personal information and/or that of my child for the purposes of administering minor hockey programs and activities.

This includes, but is not limited to, registration, team placement, scheduling, insurance, disciplinary matters, and any other operational functions directly related to participation in CPMHA-sanctioned events. Personal information may be shared with Hockey Eastern Ontario (HEO), Hockey Canada, or affiliated leagues as necessary for the proper functioning of these programs.

I understand that such information may also be used for publicity and/or media relations purposes to promote team and individual participation in league or tournament play, or for recognition of achievements, provided such disclosure is in good taste and consistent with the values of the organization.

Part 2

I further consent to the Carleton Place Minor Hockey Association, its representatives, or authorized media, to take photographs, video recordings, or digital images during games, practices, or events that may include my child. I authorize the use of such materials in any and all forms of media including, but not limited to, social media platforms, newsletters, promotional materials, and the official CPMHA website (www.cpmha.ca), without compensation or additional consent.

I understand that all information will be handled in compliance with relevant privacy laws and the CPMHA's internal policies, and that I may withdraw my consent in writing at any time, subject to legal or contractual restrictions and reasonable notice.

I agree to Part 1 & 2

I agree to part 1 only

First Name *	Last Name *	Date *
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HOCKEY CANADA

I certify the information provided to be true and in consideration of the granting of this registration to me with the privileges incident thereto, and by registering I have become subject to the rules, regulations and decisions of Hockey Canada, its Board of Directors, its Members and/or associations which may be restrictive in some areas such as movement from team to team, conduct etc. and I agree to abide by such rules, regulations and decisions of Hockey Canada, its Board of Directors, its Members and/or associations. Further, the information to be provided is required by Hockey Canada to facilitate hockey programs on behalf of the registrant and Hockey Canada. Hockey Canada will treat this personal information with the utmost respect and in accordance with the [Hockey Canada Privacy Policy](#) at all times.

In favour of

First Name *	Last Name *	Date *
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Hockey Canada Agreement

Hockey Canada does not sell, trade or otherwise share the information we collect outside our Members and Associations. However, we may from time to time use this information for the purposes of offering additional services, promotions, including promotions offered by third parties, and/or hockey specific research. This type of usage of your personal information by Hockey Canada, its Members and/or associations is entirely at your discretion. Should you choose to allow this type of usage please check the box below.

I agree

First Name *	Last Name *	Date *
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Code of Conduct for Parents and Guardians

Code of Conduct for Parents and Guardians

As a parent or guardian of a Carleton Place Minor Hockey Association (CPMHA) player, you are a member of the Association. Membership in the CPMHA and participation in its programs is a privilege and not a right. As such, the CPMHA recognizes the need to have guidelines for the standard of behaviour expected of all participants and appropriate measures to deal with those instances in which behaviour exhibited is not in the best interest of CPMHA and all concerned.

We require all CPMHA members to abide by the Code of Conduct at all times. Any conduct considered by the Association to be in violation of this Code of Conduct will be addressed and may result in disciplinary action, up to and including expulsion from the CPMHA. The CPMHA also reserves the right to reject membership in such cases where a previous record of behaviour unbecoming a member of the CPMHA has been evident. Please take time to review the Code of Conduct for Parents and Guardians.

1. I will not question the judgment or honesty of any team official or on-ice official in public. I recognize officials are being developed in the same manner as players.
2. I will respect and show appreciation for the volunteers who give their time to hockey for my child. This includes all CPMHA volunteers and on-ice officials.
3. I will leave the coaching to the coaching staff. I will provide support for coaches and officials working with the athletes to provide a positive experience for all. I will not undermine the coach's authority at any time by trying to be a coach instead of a parent.
4. I will treat all players, volunteers, parents and spectators with dignity and respect in language, attitude, behaviour and mannerisms. I understand that my behaviour reflects on my child and on Carleton Place minor hockey as a whole and I will conduct myself in an appropriate manner at all times.
5. I will never yell, taunt, threaten or inflict physical violence upon any player, volunteer, on-ice official, spectator, or member of the public at any hockey activity.
6. I will refrain from the use of abusive or vulgar language, racial, ethnic or gender-related slurs at any time at the rink or at any hockey function.
7. I will abide by the Hockey Canada 24-hour rule at all times.

I understand that membership in the CPMHA and participation in its programs is a privilege and not a right guaranteed by fees paid. I recognize that my failure to comply with this agreement will result in disciplinary action, up to and including expulsion from the CPMHA. I further acknowledge that as a member of the CPMHA, who is a member of Hockey Eastern Ontario (HEO), all HEO policies* also apply to all members of the CPMHA.

I agree

First Name *	Last Name *	Date *
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