



Terrace Ringette Association

PO Box 531, Terrace, BC, V8G 4B5

terraceringette@hotmail.com

www.terraceringette.com

2020-2021 Volunteer Registration Form

Volunteer's Name: _____ Birthdate: _____

Address: _____ Phone #: _____

Email Address: _____ Best way to contact you: _____

Would you like to register for the Coaching Clinic Yes No

Reffing Clinic Yes No

Online Manager's Course Yes No

Please list any credentials that you currently have (coaching level; manager's training; first aid)

What areas are you willing to volunteer?

- Coaching/Assistant Coaching Team requested: _____
- On-ice helper Team requested: _____
- Team Manager Team requested: _____
- Referee
- Board Member Position: _____
- Assist during the Terrace Tournament

PHOTO RELEASE

It is agreed that my son/daughter may have occasion to have their name and/or photo published as a result of, or indirect relation to activities publicized by the Terrace Ringette Association. I hereby waive and release any and all claims whatsoever in respect to such publications.

Signature

Printed name

Date signed

WAIVER OF RESPONSIBILITY

I assume all risks involved with volunteering, including, but not limited to, travel to and from Ringette functions and participation in said functions. I hereby release Terrace Ringette Association, its coaches, managers, executives, sponsors, volunteers and any other persons participating in functions, from any claims or blame arising out of injury that may occur. I agree to abide by all rules and regulations laid down by the Terrace Ringette Association.

Signature

Printed name

Date signed

Please note you will require a criminal record check every 2 years

TRA use only: Karelo# _____ Date: _____