



RICHARDSON PIONEER
WEYBURN RED WINGS

PO. Box 1112 Weyburn, SK S4H 2L3
Office: 306-842-2212 office@weyburnredwings.ca

REGISTRATION FORM

Red Wings Draft ID Camp –

FRIDAY APRIL 24 - SUNDAY APRIL 26, 2026

Please complete, and return this 2 page form by **Friday APRIL 10, 2026**

via email, mail or drop-off at the Red Wings' office.

Returning this 2 page form without payment does not guarantee you a spot in the camp.

PLAYER NAME: _____ DOB: _____

ADDRESS: _____

POSTAL CODE: _____ CITY: _____

PHONE: HOME: _____ CELL: _____

BEST POSITION: _____ SECOND BEST POSITION: _____ SHOOTS: _____

2024/25 SEASON: GP: _____ GOALS: _____ ASSISTS: _____ PTS: _____ PIM: _____

GOALIES: GP: _____ GAA: _____ SV%: _____ CATCHES: _____

LAST TEAM PLAYED FOR: _____

COACH: _____ PHONE NUMBER: _____

2025/26 PLAYING INTENTIONS: _____

MEDICAL CONDITIONS: _____

To **REGISTER**, complete the attached registration form and email / mail.

Include payment of **\$244.20** (\$220.00 + Taxes) by Friday April 10, 2026.

You are not fully registered until full payment has been made with the office and will receive an email confirming your registration.

1. E-transfer: payments@weyburnredwings.ca (**MUST include Skaters Name in notes section**)
2. Credit Card: Call office 1-306-842-2212
3. Mail: Weyburn Red Wings
P.O. Box 1112
Weyburn, SK S4H 2L3

Questions: Please contact the office at 306-842-2212 or email at office@weyburnredwings.ca

Camp Refunds: Players who sign with another Junior hockey team prior to or after the start of this camp immediately become ineligible to participate in this program. No refunds will be payable to any player who becomes ineligible, drops out, or cancels for any reason except major injury 7 days before the start of camp with a medical note. A \$50 administration fee will be deducted from any refund due to a participant.

PLEASE REVIEW AND SIGN THE WAIVER ON THE FOLLOWING PAGE



RICHARDSON PIONEER
WEYBURN RED WINGS

SIGNATURE AND WAIVER

In consideration of this application to play, I accept;

1. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown. EVEN ARISING FROM THE NEGLIGENCE OF THE RELEASES or others, and assume full responsibility for my participation; and
2. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment and personal discipline will reduce this risk, the risk of serious injury does exist; and
3. I willingly agree to comply with the stated and customary terms and conditions for participation. If however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such attention to the nearest official immediately; and
4. I, for myself and on behalf of my heirs, assigns, personal representative and next of kin, HEREBY RELEASE AND HOLD HARMLESS the Weyburn Red Wings Hockey Club, their officers, officials, agents and all employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable owners and leaser of premises used to conduct the event (Releases). WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER CAUSED BY THE NEGLIGENCE OF THE RELEASES OR OTHERWISE
5. I hereby certify and agree to carry out fully all the rules and regulations of SHA, CJHL, and SJHL.
6. Photography, audio, and video may be used to promote oneself and organization. Consent to such recording media and its release, publication, exhibition or reproduction is given.

FOR PARTICIPANTS OF MINORITY AGE (18 and under) (Under Age is at time of registration)

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his release as provided above, of all the Releases, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify the Releases from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above.

Signature of Player:

_____ Date: _____

Signature of Guardian:

_____ Date: _____