

Town of Eston

111 4th Ave SE | Box 757

Eston, SK S0L 1A0

(306) 962-4444 | Fax: (306) 962-4224

[contact@eston.ca](mailto:contact@eston.ca) | eston.ca

2024-2025 Eston Hockey & Skating Registration

Deadline to Register: Thursday August 1, 2024

Payment is due upon registration



KidSport funding is available for those who qualify and must be submitted with registration by the deadline to qualify. Please contact Recreation Director Garrett Turner for more information.

Registration is not complete until the form, code of conduct, and medical information have been received. Please note all previous outstanding fees must be paid prior to completed registration.

| Age Division | Eston Minor Hockey Fees |
| --- | --- |
| Pre - Initiation / Learn to Play (2020) | $200 |
| U-7 (2018 & 2019) | $475 |
| U-9 (2016 & 2017) | $475 |
| U-11 (2014 & 2015) | $525 |
| U-13 (2012 & 2013) | $525 |
| U-15 (2010 & 2011) | $525 |
| U-18 (2007, 2008, 2009) | $525 |
| Can-Skate - 1 | $200 |
| Can-Skate - 2 | $200 |
| Family Pass | $1,200 |

Participant Information

First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth Year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birth Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: M / F

Parent / Guardian Information

Parent / Guardian (1) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone (1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email (1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (1): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* Include Postal Code

Parent / Guardian (2) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone (2): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email (2): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address (2): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\* if different than Address 1

Please mark the following team positions you are interested in volunteering for:

Head Coach \_\_\_\_\_\_

Assistant Coach \_\_\_\_\_\_

Manager / Co-Manager \_\_\_\_\_\_

Hi-Way 14 League Commissioner \_\_\_\_\_\_

\* if Eston is selected for your division

\* Please note - All local athletes registered in U-13 or higher are required to volunteer for a minimum of 3 practices with younger age groups throughout the 2024-25 hockey season.

Disclaimer - Please be advised that the Eston & District Recreation Committee tries their best to keep the registration as low as possible with the operational demands of our facility. In order to complete this we also require all local winter sport participants to team booth shifts that will be distributed to each team manager for your required week/weeks. We thank you for your cooperation in this.