



Club Details

Club Name _____

Player Details

Surname _____ Title _____

First Name _____ Middle Name _____

Address _____

_____ Postcode _____

Telephone _____ Date of Birth _____

Nationality _____ Officials / Coach _____

Currently Registered with Institution _____ License Number _____

_____ Course _____

Student Number _____ Graduation Date _____

Current Status Student Staff 1st Year Alumni Other Alumni

Player Declaration

I hereby consent to be bound by the rules, regulations and by-laws of the IIHF, Ice Hockey UK, BUIHA, EIHA/SIHA and the club to which I am applying. I declare that I am eligible to represent the institution for which I am registering and that all the above information is correct.

Signature _____ Date _____

To Be Completed by Club Official

I request that the above named player be registered and insured with the above named Club. I declare that the player is eligible for registration with the team specified below given the BUIHA rules of competition. I enclose with this form; A copy of applicants Birth Certificate, Passport or Driving Licence as proof of ID and payment in addition to:

Student – a copy of applicants' student card and proof of current status as such.

Staff – a copy of applicants' staff card and proof of current status as such.

Alumni – a copy of proof of graduation and two endorsed Passport Style Photographs.

All supplied copies of applicants' information should be of high quality and of its original size.

Division One

Division Two

Division Three

Alumni Only

Training Only

Club Official Details

Name _____ Position _____

Signature _____ Date _____