



**RAVENS**  
CARLETON UNIVERSITY

**Carleton Women’s Adult Hockey League Team Agreement**  
**2016-17 Winter League**

2016-17 Winter hockey league agreement between Carleton Adult Hockey League (CWAHL) and:

<b>Team Name:</b>	
<b>Team Rep Name:</b>	
<b>Team Rep E-Mail:</b>	
<b>Team Rep Phone:</b>	
<b>Assistant Rep Name:</b>	
<b>Assistant Rep E-Mail:</b>	
<b>Assistant Rep Phone:</b>	

hereby contracts with the CAHL for the 2016-17 Winter season at Carleton University, at 1125 Colonel By Drive, and in doing so, signify our intention of entering a team in the CAHL by signing this form and providing a NON-REFUNDABLE DEPOSIT OF \$500.00 as the first payment of the entry fee (FULLY returned if team is rejected).

**TERMS AND CONDITIONS**

This agreement will be based on the following:

1. All teams will play 25 games including playoffs.
2. The full team fee to play in CWAHL's 2016-17 Winter Hockey Season is \$5700.00.  
Balance of team entry fee, after receipt of the \$500.00 deposit (dated July 15<sup>th</sup>, 2016), will be due in two (2) payments made payable to Carleton University Athletics – CAHL and MUST ACCOMPANY THIS AGREEMENT.

**Payment Schedule**

1st payment: \$500.00 deposit due by July 15<sup>th</sup>, 2016  
2nd payment: \$2600.00 dated September 15<sup>th</sup>, 2016  
3rd payment: \$2600.00 dated November 15<sup>th</sup>, 2016  
**Total: \$5,700.00**

## Payment Information

3. The CAHL requires all teams to provide post-dated cheques, credit card authorization form or Electronic Fund Transfer (EFT) form for the above payment schedule.
4. To update method of payment contact [Andrea.Kenny@carleton.ca](mailto:Andrea.Kenny@carleton.ca) at least 2 weeks prior to payment date
5. Failure to provide payment will result in a forfeited game. Failure to provide payment by the 2<sup>nd</sup> game will result in team removal from the CAHL.
6. Team also agrees to, and include, a \$200.00 Team Bond, (cheque or credit card authorization) to be dated July 31<sup>st</sup>, 2016), to be applied towards any fines or charges (ie. Cancelled/NSF cheques, forfeits, property damages, penalty fines, player or team disciplinary issues...) that the team may be assessed during the season.
7. All cheques returned NSF, will result in a \$50.00 service charge added onto replacement cheque/cash, or may be taken from Team Bond. No 'third party' cheques will be accepted.
8. Any regularly scheduled and/or playoff games that cannot be played at scheduled date and time because of University commitments to other clients and/or for unforeseen problems will be rescheduled for the first available date and time, and in case of playoffs, only if necessary.
9. SWEATERS. ALL players on all teams MUST wear IDENTICAL coloured sweaters. Teams are required to have two set of sweaters. See Rules and Regulations.
10. ALL helmets and goalie masks MUST be CSA approved with NO missing or broken parts and MUST have a proper chin strap (no tape). NO EXCEPTIONS UNDER ANY CIRCUMSTANCES AT ANY TIME. If a player is seen on the ice with a helmet that no longer conforms with this article's first sentence, will receive an 'illegal equipment' minor penalty and will not be permitted to return to the ice until it is corrected or replaced. Helmet violations will be called by referees who may have been informed by a timekeeper or supervisor.
11. Final selection of teams for entry into the CAHL will be at the discretion of the CAHL Directors and/or the CAHL Convener.
12. No team in the CAHL may use a 'carded' player who is playing in any junior league, or better caliber. Semi-professional players are permitted.
13. I have read and understand the CAHL's Terms and Conditions. I also agree to inform all my team's players of all CAHL's Terms and Conditions. I further agree to submit my player roster WITH this application for player approval by the CAHL. Any and ALL new players wishing to play on this team after team realignment (after 5th game) may have to provide picture ID and will be subject to CAHL approval.
14. I/We agree that our team, or any player on our team, may be ejected from the CAHL for "just cause" (displaying a continual lack of respect to opposing players and either referees or CAHL officials, intent to injure anyone, etc.) without any reimbursement of CAHL fees given to that point.

My/our signature hereunder, accompanied by my/our \$500.00 deposit, payable to the CARLETON UNIVERSITY ATHLETICS - CAHL, 2 additional post-dated payments, and \$200 Team Bond, in the aforementioned amounts and dates (Items #4 and #5), plus our player roster, signifies my/our acceptance of this agreement and to all terms and conditions as written.

Team Rep Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TEAM ROSTER & WAIVER FORM**

All team members must complete the Online Roster and Waiver Registration section of the website ([www.carletonadulthockeyleague.ca](http://www.carletonadulthockeyleague.ca)). An email will be sent to team reps with instructions at least 2 weeks prior to season start

**CAHL QUESTIONNAIRE**

<b>TEAM NAME</b>	
<b>PREFERRED DIVISION (A=STRONGEST, D=WEAKEST)</b>	
<b>SWEATER COLOUR (HOME/AWAY)</b>	
<b>SIMILARLY SKILLED TEAMS</b>	
<b>TEAMS YOU DO NOT WANT TO PLAY</b>	
<b>COMPARED TO SUMMER 2016 (UP/DOWN)</b>	
<b>COMPARED TO WINTER 2015-16 (UP/DOWN)</b>	

**NEW TEAMS ONLY**

<b>PREVIOUS LEAGUE</b>	
<b>LIST ANY SUSPENDED PLAYERS</b>	

**CAHL CONTACT INFORMATION**

Joshua Shaw  
Student & Adult League Officer  
Department of Physical Recreation  
Carleton University  
Ottawa, ON  
K1S 5B6

P: 613 520 7804  
E: [Joshua.Shaw@carleton.ca](mailto:Joshua.Shaw@carleton.ca)  
F:613-520-4466

**Ice House Welcome Centre**  
P:613-520-2600x4655



**RAVENS**  
CARLETON UNIVERSITY

**Credit Card Authorization Form**

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**DATE:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**PROVINCE:** \_\_\_\_\_

**POSTAL CODE** \_\_\_\_\_

**PHONE: (H)** \_\_\_\_\_

**(O)** \_\_\_\_\_

**FAX#** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**CREDIT CARD:** Please circle one      VISA      MasterCard

**CREDIT CARD #:** \_\_\_\_\_

**EXPIRY DATE:** \_\_\_\_\_

**CAHL Winter 2016-17 Payment Schedule**

July 15th, 2016	\$500.00
September 15th, 2016	\$2,600.00
November 15th, 2016	\$2,600.00
<b>Total:</b>	<b>\$5,700.00</b>

**SIGNATURE:** \_\_\_\_\_



# Electronic Funds Transfer Authorization

Electronic Funds Transfer (EFT) is an optional service designed for clients who wish to pay for services of the Department of Recreation and Athletics on a fixed payment schedule.

The following conditions apply to this service:

- You must provide us with a VOID cheque from your financial institution to avoid errors in banking information.
- We will not transfer cash electronically to or from third parties.
- You should provide a valid email address for any necessary notifications
- The EFT service is for Canadian dollar accounts only.
- Your financial institution must be situated in Canada.
- If you change your banking information you must notify our Welcome Center Administrator before any withdrawal is performed.

## Client Information

Client Name/Team Name \_\_\_\_\_ Joint Account Holder Name (if applicable) \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

## Transaction

**Funds Transfer Pre-Authorized Debit (PAD)** – Transfer cash from your financial institution account to pay for your Carleton Adult Hockey League team as per payment schedule below, for a total of **\$5700.00** tax included.

Type	Amount	Payment Date
Deposit	\$500.00	15-Jul-2016
First Payment	\$2600.00	15-Sep-2016
Second Payment	\$2600.00	15-Nov-2016

## Banking Information (Please staple a VOID cheque)

If this is a joint bank account, have the joint account holder sign here<sup>2</sup> **X** \_\_\_\_\_  
<sup>2</sup> This is for instances where signatures of both account holders are required as per the term of the joint bank account. .

Additional Notes: \_\_\_\_\_

## Client Authorization

**I/We hereby authorize Carleton University – Department of Athletics to conduct the Electronic Funds Transfer(s) as indicated above. I/We have read the terms and conditions contained on the Carleton University Electronic Funds Transfer Authorization Form and agree that such terms and conditions are binding on me/us.**

**X** \_\_\_\_\_  
Client Signature \_\_\_\_\_ Witness \_\_\_\_\_ Date (mm/dd/yyyy) \_\_\_\_\_

Carleton University –  
Department of Recreation and  
Athletics • [www.carleton.ca/athletics](http://www.carleton.ca/athletics)

1125 Colonel By Drive • Ottawa Ontario K1S 5B6 • Tel: 1.613.520.4480

# Electronic Funds Transfer Authorization

## Electronic Funds Transfer (EFT) Terms & Conditions

In this Agreement,

- "you", "your" means "Carleton University – Department of Recreation and Athletics".
  - "me", "my", "I", means the "Customer".
  - "Processing Institution" means the financial institution that holds the Account to be credited/debited by means of Electronic Funds Transfer.
  - "Processing Institution Account" means my Account at the financial institution.
- a) I acknowledge that all my financial transactions will be handled by your Electronic Funds Transfer service. The Processing Institution Account that Carleton University – Department of Recreation and Athletics is authorized to draw upon has been specified by me on the Carleton University – Department of Recreation and Athletics Electronic Funds Transfer Authorization Form. A specimen cheque has been marked "VOID" and attached to the Carleton University – Department of Recreation and Athletics Electronic Funds Transfer Authorization Form.
  - b) I acknowledge that this authorization is provided for the benefit of Carleton University – Department of Recreation and Athletics and the Processing Institution and is provided in consideration of the Processing Institution agreeing to process debits for my Processing Institution Account in accordance with the Rules of the Canadian Payments Association.
  - c) This authorization is continuing and Carleton University – Department of Recreation and Athletics may rely on this authorization for all financial transactions relating to my account(s) and/or my Processing Institution Account(s), until I notify Carleton University – Department of Recreation and Athletics of any changes in accordance with section (f) below.
  - d) I warrant and guarantee that all persons whose signatures are required to sign on my Processing Institution Account(s) have provided their signature(s) on the Carleton University – Department of Recreation and Athletics *Electronic Funds Transfer Authorization Form*.
  - e) I hereby authorize Carleton University – Department of Recreation and Athletics to deposit or draw on the Processing Institution Account, for the following purposes:
    - i. Debiting my Processing Institution Account in accordance with Page 1 of the Carleton University – Department of Recreation and Athletics Electronic Funds Transfer Authorization Form.
  - f) I may change or revoke this authorization at any time upon providing thirty (30) business days written notice to Carleton University – Department of Recreation and Athletics. In the case of a change or revocation that impacts the debiting of my services, written notice must be received by Carleton University – **Department of Recreation and Athletics not later than 30 days** in the year in which the service is to be debited. Sample cancellation forms or further information on your rights to cancel any pre-authorized debits can be obtained from my Processing Institution or by visiting [www.cdnpay.ca](http://www.cdnpay.ca). Full refund policy details are available by visiting [www.carleton.ca/athletics](http://www.carleton.ca/athletics)
  - g) I acknowledge that Carleton University – Department of Recreation and Athletics has the right to terminate my authorization, if through no fault of your own, you are unable to debit the Processing Institution Account(s) in the full amount that I have specified.
  - h) I acknowledge that provisions and delivery of this authorization to Carleton University – Department of Recreation and Athletics constitutes delivery by me to the Processing Institution.
  - i) I acknowledge that I am responsible for ensuring that there are sufficient funds available in my Processing Institution Account to cover any transfers. I am responsible for all service fees that may arise in connection with my Processing Institution Account.
  - j) I undertake to inform Carleton University – Department of Recreation and Athletics, in writing, of any changes in the Processing Institution Account information provided in this authorization prior to requesting any transactions with respect to my Processing Institution Account.
  - k) I acknowledge that the Processing Institution is not required to verify that a deposit or debit has been issued in accordance with the particulars of my authorization including, but not limited to, the amount and frequency of deposits or payments.
  - l) I acknowledge that the Processing Institution is not required to verify that any purpose of payment for which the debit was issued has been fulfilled by Carleton University – Department of Recreation and Athletics as a condition to honouring a debit issued or caused to be issued by me on my Processing Institution Account.
  - m) Revocation of this authorization does not terminate any contract for goods or services that exists between me and Carleton University – Department of Recreation and Athletics. My authorization applies only to the method of payment and does not otherwise have any bearing on the contract for the goods or services exchanged.
  - n) I have waived my right to receive pre-notification of the amount of each pre-authorized debit authorized by the Carleton University – Department of Recreation and Athletics Electronic Transfer Authorization and agree that I do not require advance notice of the amount of the pre-authorized debits before the debit is processed. **The initial receipt will contain details on the dates of each preauthorized debits will be performed.**
  - o) **I have certain recourse rights if any debit does not comply with the Carleton University – Department of Recreation and Athletics Electronic Funds Transfer Authorization Form. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this document. To obtain more information on my recourse rights, I may contact my Processing Institution or visit [www.cdnpay.ca](http://www.cdnpay.ca)**
  - p) If the funds in my Processing Institution Account are insufficient to cover any debit authorized by the Carleton University – Department of Recreation and Athletics Electronic Funds Transfer Authorization Form, Department of Recreation and Athletics may assess a \$25 + HST NSF fee, as outlined in the Carleton University – Department of Recreation and Athletics Service Fee Schedule. In the case of insufficient funds, the NSF fee and the failed debit will be withdrawn from my Account.