

# 2026 NATIONAL INDIGENOUS JUNIOR HOCKEY CHAMPIONSHIPS ATHLETE CONSENT AND CONDUCT FORM



Please Complete the form below:

## Term & Conditions :

This form is mandatory for all athletes participating in the National Indigenous Junior Hockey Championships. It outlines the consent, expectations, and code of conduct required to ensure a respectful, safe, and inclusive environment. Ages 16, 17, 18, 19, 20, and 21 before July 15, 2026.

Full Name	:													
Full Address	:													
Team	:						Indigenous Community :							
Date Of Birth	:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Position :	F	<input type="text"/>	D	<input type="text"/>	G	<input type="text"/>
		D	D	M	M	Y	Y	Do you reside On-reserve? :	Yes	<input type="text"/>	No	<input type="text"/>		

## Consent:

### 1. Medical Consent:

I consent to the provision of basic first aid by authorized personnel in the event of an injury or emergency. I authorize the event organizers to secure medical assistance as necessary.

o Athlete Initials: \_\_\_\_\_

### 2. Photo/Video/Media Release:

I grant permission for photographs and videos of me participating in the championships to be used for promotional, educational, and archival purposes by the National Indigenous Junior Hockey Championships and Hockey Indigenous.

o Athlete Initials: \_\_\_\_\_

### 3. Waiver of Liability:

I acknowledge and accept the risks inherent in participating in the National Indigenous Junior Hockey Championships. I release the event organizers, sponsors, and staff from any liability for injury or damages resulting from participation, except in cases of gross negligence. I understand the NIJHC will not be responsible for injuries, illness occurred, or lost or stolen items.

o Athlete Initials: \_\_\_\_\_

## Code of Conduct:

### 1. Respect for Others

- Treat all teammates, opponents, officials, staff, and spectators with respect, dignity, and inclusivity.
- Avoid any form of harassment, racism, derogatory comments, discrimination, or bullying.

### 2. Sportsmanship

- Exhibit fair play and integrity on and off the ice.
- Refrain from using abusive language, gestures, or unsportsmanlike conduct.

### 3. Substance-Free Environment

- Abstain from using alcohol, drugs, or any banned substances during the event.

### 4. Compliance with Rules

- Follow the event's rules, regulations, and any instructions given by officials and event staff.
- I understand there will be body contact in this tournament and will not behave aggressively and play with caution.

### 5. Cultural Respect

- Honor the cultural significance of this championship by respecting Indigenous traditions and practices associated with the event.

I understand that violation of this Code of Conduct may result in disciplinary actions, including suspension or removal from the event.

Athlete Initials: \_\_\_\_\_

### Signatures:

I, the undersigned, confirm that I have read, understood, and agree to the terms outlined in this consent and conduct form.

- Athlete Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_

### Parent/Guardian Consent (if under 18 years old):

I, the parent/guardian of the above-named athlete, confirm that I have read, understood, and agree to the terms outlined in this consent and conduct form.

- Parent/Guardian Name: \_\_\_\_\_
- Parent/Guardian Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_



Thank you for your commitment to upholding the values and integrity of the National Indigenous Junior Hockey Championships!

# 2026 NATIONAL INDIGENOUS JUNIOR HOCKEY CHAMPIONSHIPS



## TEAM STAFF FORM

Please Complete the form below:

### Term & Conditions :

This form is mandatory for all team staff participating in the National Indigenous Junior Hockey Championships. It ensures all staff members understand their roles, responsibilities, and the expectations required for a safe and respectful event.

Full Name	:									
Full Address	:									
Team	:		Indigenous Community	:						
Date Of Birth	:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Position/Role	:		
		D	D	M	M	Y	Y			

### Consent and Waivers:

#### 1. Medical Consent

- I consent to receive basic first aid in the event of injury or emergency. I also authorize event organizers to seek additional medical assistance if required.

• Staff Initials: \_\_\_\_\_

#### 2. Photo/Video/Media Release

- I give permission for my image to be used in event promotions and documentation.

• Staff Initials: \_\_\_\_\_

#### 3. Liability Waiver

- I understand the risks involved in my participation and release the event organizers, sponsors, and staff from liability for injuries or damages, except in cases of gross negligence.

• Staff Initials: \_\_\_\_\_

#### 4. Criminal Record Check

- I confirm I have submitted or will submit a valid Criminal Record and Vulnerable Sector Check.

• Staff Initials: \_\_\_\_\_

### Code of Conduct:

As a team staff member, I commit to the following:

#### 1. Professional Conduct

- Act as a role model for athletes by maintaining respect, integrity, and fairness at all times.
- Avoid any form of harassment, discrimination, or misconduct.
- I have read and understand the NIJHC Technical package, rules, guidelines, and policies of the National Indigenous Junior Hockey Championships.

#### 2. Safety and Well-being

- Prioritize the safety and welfare of all participants.
- Adhere to all safety protocols and event guidelines.
- I understand there will be body contact in this tournament and will remind players to behave aggressively and play with caution.

#### 3. Respect for Culture

- Honour and support Indigenous traditions and practices associated with this event.

#### 4. Substance-Free Environment

- Abstain from alcohol, drugs, or banned substances during the event.
- Respect and honour the rules, regulations, and technical package of the NIJHC.

I understand that any breach of this Code of Conduct may result in disciplinary actions, including suspension or removal from the event.

• Staff Initials: \_\_\_\_\_

### Signatures:

I confirm that I have read, understood, and agree to the terms outlined in this form.

- Staff Member Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_



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# 2026 NATIONAL INDIGENOUS JUNIOR HOCKEY CHAMPIONSHIPS



## ACKNOWLEDGEMENT AND COMMITMENT FORM (TEAM MANAGER ONLY)

Please Complete the form below:

### ■ Term & Conditions :

This form is required for all participants to confirm their understanding of the event's expectations, their commitment to upholding its values, and acknowledgment of the responsibilities involved. All roster and staff must apply.

Full Name :

Full Address :

Team :

Date Of Birth :        
D D M M Y Y

### **Acknowledgements:**

1. **NIJHC Technical Package, Rules and Policies**
  - I have read and understand the rules, guidelines, and policies of the National Indigenous Junior Hockey Championships. I agree to comply with all expectations outlined by the organizers.
  - Initials: \_\_\_\_\_
2. **Risk and Responsibility**
  - I understand the physical and emotional demands of participating in or supporting this event and accept any associated risks. I release the event organizers and sponsors from liability for injuries or damages except in cases of gross negligence.
  - Initials: \_\_\_\_\_
3. **Cultural Respect**
  - I recognize the cultural significance of this event and commit to honoring and respecting Indigenous traditions and practices.
  - Initials: \_\_\_\_\_

### **Commitment to Conduct:**

As a participant, I commit to the following:

1. **Respect and Sportsmanship**
  - Treat all players, officials, staff, and attendees with respect and dignity.
  - Uphold fairness, teamwork, and positive communication at all times.
2. **Safety and Well-being**
  - Prioritize the health and safety of myself and others.
  - Avoid actions that may harm or endanger anyone involved in the event.
3. **Substance-Free Environment**
  - Refrain myself and the team from using drugs, alcohol, or banned substances during the event.
4. **Compliance with Disciplinary Actions**
  - Accept any consequences, including removal from the event, for violations of this commitment.
  - Respecting all rules and regulations of the NIJHC.

I understand that my participation in the National Indigenous Junior Hockey Championships depends on adherence to this commitment.

- Initials: \_\_\_\_\_

### **Signatures:**

I confirm that I have read, understood, and agreed to the acknowledgments and commitments outlined in this form.

- Team Manager Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_



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# 2026 NATIONAL INDIGENOUS JUNIOR HOCKEY CHAMPIONSHIPS



## DECLARATION OF INDIGENOUS ANCESTRY FORM

Please Complete the form below:

### Term & Conditions :

This form is required to confirm the eligibility of participants based on their Indigenous ancestry. By signing this form, you affirm your connection to an Indigenous community, nation, or heritage, in keeping with the principles of this event with photo ID proof.

Full Name :

Full Address :

Team :  Indigenous Community :

Date Of Birth :        
D D M M Y Y

### Declaration of Indigenous Ancestry:

#### 1. I am of Indigenous ancestry (Check all that apply):

- ☐ First Nations
- ☐ Métis
- ☐ Inuit
- ☐ Native American (USA)

#### 1. I am registered/connected to the following Indigenous Nations:

Community/Nation Name: \_\_\_\_\_

Province/Territory/State: \_\_\_\_\_

#### My connection to this community/nation is based on (select one):

- 1. ☐ Membership or Registration (e.g., Status/Inuit, Métis citizenship card, or Native American Citizen)
- 2. ☐ Letter supported by family and Community
- 3. ☐ Other (please explain): \_\_\_\_\_

4. ID Photo

5. Photo Attached (Mandatory).

### Commitment to Conduct:

By signing this declaration:

- I confirm that the information provided is truthful and accurate to the best of my knowledge.
- I understand that providing false information may result in disqualification from the National Indigenous Junior Hockey Championships and Hockey Indigenous programs.
- I commit to respecting and honoring the cultural values and significance of this event as it celebrates Indigenous identity and community.
- Participant Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_

#### Signatures:

I, the undersigned, confirm that I have read, understood, and agree to the terms outlined in this Indigenous Ancestry form.

- Athlete Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_

#### Parent/Guardian Consent (if under 18 years old):

I, the parent/guardian of the above-named athlete, confirm that I have read, understood, and agree to the terms outlined in this Indigenous Ancestry form.

- Parent/Guardian Name: \_\_\_\_\_
- Parent/Guardian Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_



Thank you for your commitment to upholding the values and integrity of the National Indigenous Junior Hockey Championships!

# 2026 NATIONAL INDIGENOUS JUNIOR HOCKEY CHAMPIONSHIPS



## ACADEMIC RESIDENCY FORM

Please Complete the form below:

### ■ Term & Conditions :

This form verifies the academic enrollment and residency status of participants to ensure compliance with eligibility requirements for the National Indigenous Junior Hockey Championships.

Full Name :

Full Address :

Team :

Date Of Birth :        
D D M M Y Y

### Academic Residency Verification:

1. Current School Name: \_\_\_\_\_

- School Address: \_\_\_\_\_
- City/Town: \_\_\_\_\_
- Province/Territory: \_\_\_\_\_
- Postal Code: \_\_\_\_\_

2. Grade Level: \_\_\_\_\_

#### 3. Enrollment Status

I confirm that I am:

- ☐ Currently enrolled and attending full-time classes at the above school.
- ☐ Other (please explain): \_\_\_\_\_

### Acknowledgment and Authorization:

By signing this declaration:

- I certify that the information provided in this form is truthful and accurate.
- I understand that providing false information may result in disqualification from the National Indigenous Junior Hockey Championships.
- I authorize the event organizers to contact the school listed above for verification if required.

#### Signatures:

I, the undersigned, confirm that I have read, understood, and agree to the terms outlined in this Academic residency form.

- Athlete Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_

#### Parent/Guardian Consent (for under 18 years old):

I, the parent/guardian of the above-named athlete, confirm that I have read, understood, and agree to the terms outlined in this Academic residency form.

- Parent/Guardian Name: \_\_\_\_\_
- Parent/Guardian Signature: \_\_\_\_\_
- Date (DD/MM/YYYY): \_\_\_\_\_



Thank you for your commitment to upholding the values and integrity of the National Indigenous Junior Hockey Championships!

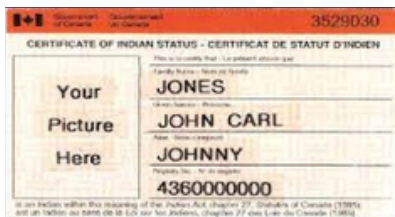
# 2026 NATIONAL INDIGENOUS JUNIOR HOCKEY CHAMPIONSHIPS



## ACCEPTED ANCESTRY CARDS

Accepted cards will apply and expired cards will be denied.

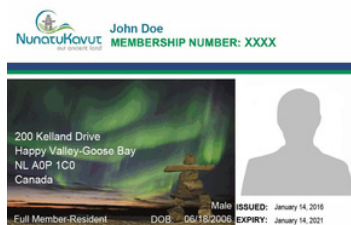
### Status Cards:



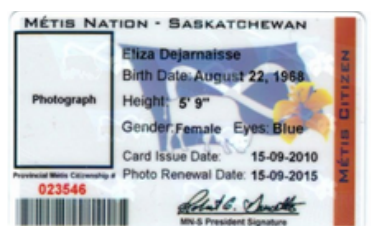
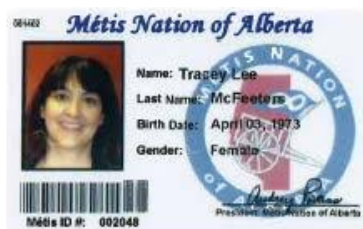
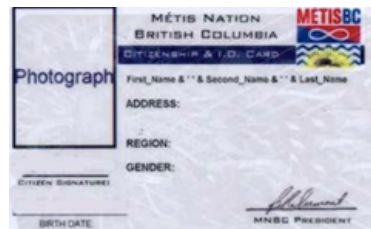
### Northwest Territories:



### Inuit Cards:



### Metis Cards:



Thank you for your commitment to upholding the values and integrity of the National Indigenous Junior Hockey Championships!