

# RPM Hockey Company Ltd.

Email [craig@rpmhockey.com](mailto:craig@rpmhockey.com)      Web [www.rpmhockey.com](http://www.rpmhockey.com)

What are your intentions for the 2025/26 School Year? **Please check one**

- Returning to Academy     
  Not, returning to Academy     
  I am not sure at this time

## Deposit of \$164 Due with re-registration form

**Academy Fees 2025/26 - \$820 - RPM will accept 5 payments of \$164, as a convenience to parents.**

*Please note: these are not monthly payments but a payment plan*

**\*\*NEW - Payment & refund schedule:**

Payment	Due Date	Refund Deadline	Total paid to date	Refund amount	Non-refundable
<b>#1 -Deposit \$164</b>	<b>With registration</b>	<b>Feb 28</b>	<b>\$164</b>	<b>Dep - \$50 = \$114</b>	<b>Mar 1</b>
#2 - \$164	Apr 1	Apr 30	\$328	Pmt 2 - \$50 = \$114 <b>Dep non-refundable</b>	May 1
#3-5 - \$164	Oct 1- Dec 1	Possible Pro-rated			

I will pay for this academy by:      Visa       Master Card       American Express

Card Number \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/      Exp \_\_\_\_\_/\_\_\_\_\_      CVC(# on back) \_\_\_\_\_

Info online from last year

**Any withdrawals after Sept 1/25, will be pro-rated based on administrative approval.**

**Any withdrawals after the 1<sup>st</sup> of each month are charged for that month. For ex: withdraw Oct 10, Oct payment is not refundable.**

**Should your student withdraw from the academy for any reason you must email RPM Hockey Company at [holly@rpmhockey.com](mailto:holly@rpmhockey.com) to be eligible for any refund. Administration is provided by the RPM Hockey Company Ltd.**

I have (Parent/Guardian Name) **Please print** \_\_\_\_\_ have read the above application & agree to the terms outlined. I understand it is the parent/guardian responsibility to ensure payments are in good-standing and up-to-date & failure to do so could result in restricted participation for my child. **I understand that if I choose to withdraw my child, I must email [holly@rpmhockey.com](mailto:holly@rpmhockey.com) to be eligible for a refund.**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Name: \_\_\_\_\_ Grade for 2025/26 year: \_\_\_\_\_

School(Academy Location): \_\_\_\_\_

Re-Registration forms must be emailed to [holly@rpmhockey.com](mailto:holly@rpmhockey.com)

**“The pursuit of Academic and Hockey Excellence”**