

REGISTRATION FORM
Redmen Hockey School
August 6th to 10th, 2012

Name : _____ Last Name : _____

Address : _____

City : _____ Postal Code : _____

Birth Date: ____/____/____ Medical Insurance #: _____

Phone Day : (____) _____ Email : _____

Height : _____ Weight : _____ Position : _____

Level Played 2010-2011 (Circle)

	Novice		Atome		PeeWee	
AA	BB	CC	A	B	C	

Parent/Guardian signature: _____ Date : ____/____/____

Registration cost : 385,00\$
(add meals for the week for 50\$)

*Cancellation fees : 120\$ (2 weeks prior minimum).

Late cancellation demands will be treated individually.