

HOCKEY SKILLS CAMP FOR YOUTH

AT ANOWARAKOWA ARENA

Player Information

Players Name:	Male <input type="checkbox"/> Female <input type="checkbox"/>	Phone#:
Address:	Province:	Postal Code:
Health Insurance#:	Physician:	Hospital:
Email:	Date of Birth:	

Information

Position: Goalie <input type="checkbox"/> Defense <input type="checkbox"/> Forward <input type="checkbox"/>	Years of playing:	New Player:
Preferred T-shirt size: (Not Guaranteed)	Previous Association:	
Division (circle): IP 2009/2010/ 2011 Novice 2007/2008 ATOM 2005/2006 PEEWEE 2003/2004 BANTAM 2001/2002 MIDGET 2000/1999/1998		



Parents/Guardian Information

Mothers Name :	Fathers Name:	
Address or same as child:	Address or same as child:	
Telephone #:	Telephone #:	
Email:	Email:	
Willing to Coach: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Emergency Contact		
Name:	Phone Number:	Relationship:
Name	Phone Number:	Relationship:

Parent/Guardian Signature: _____ Date: _____

HSCY Signature: _____ Date: _____

- ❖ Limited 20 Skaters per Session
- ❖ Regular Fee is due November 1st, 2016
- ❖ Make Check out to Mohawk Council of Akwesasne

Contact: Arena@Akwesasne.ca or Call 613-936-1583

