

STREETSVILLE 4 ON 4 HOCKEY 2020

LAST NAME		FIRST NAME		DATE OF BIRTH DAY MONTH YEAR	
EMAIL:					
TEAM:		LEVEL:		POSITION:	
EMAIL 2:					
Male/Female	Phone:	Parents Name:			

PARENT/LEGAL GUARDIAN/ PLAYER SIGNATURE IF 16 YEARS AND ABOVE

Signature indicates that I have read the Rules of Conduct for Players and Parents and agree to follow them.

DATE FORM SIGNED

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STREETSVILLE 4 ON 4 HOCKEY 2020

The stamp to the right confirms that registration and payment in the amount of \$_____ for the 4 ON 4 WINTER HOCKEY 2020 program has been received from _____ on behalf of _____ Born:_____.

<p>Programs Manager P.O. Box 632, Streetsville, Ontario L5M 5B7 E-mail: info@streetsvillehockey.com</p> <p><u>House League Division:</u> Derby Division (2009s-2007s) Players: \$300 Goalies: \$200</p> <p><u>Birth Years:</u> 2009s 2008s 2007s</p> <p>ALL GAMES AT VIC JOHNSTON ARENA</p>	<p><u>Season Start Dates:</u></p> <p><u>Derby Divisions (2009s-2007s)</u></p> <p>Season Starts Sunday January 12th, 2020</p> <p>Season Ends Sunday March 22nd, 2020 (11 games)</p> <p>Games will be Sunday mornings at 8am & 9am.</p> <p>4 on 4 is a relaxed hockey league allowing the kids to get extra game time, and keep in shape in a no pressure, "shinny" type environment. Players from all leagues are welcome!</p>
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