

ALMONTE / PAKENHAM MINOR HOCKEY ASSOCIATION -- TOURNAMENT REGISTRATION FORM

Association: _____

Division / Level: _____ eg. Bantam A House

Team Name: _____

Coaching Staff: Please provide full contact information for Coach & Manager AND "name only" for other coaching staff.

	Coach	Assistant Coach	Assistant Coach	Manager	Trainer
Name					
Phone #					
Fax #					
E-Mail					
				Trainer #	

Team List (Please Type or Print Legibly)

	Sweater #	Player Name	Date of Birth	Card # (Competitive Teams ONLY)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
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16				
17				
18				