

# 2019/20 CeeBees Minor Hockey Player Registration

## Child Information

Player Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_ MCP: \_\_\_\_\_ Division: \_\_\_\_\_

## Parent/Guardian Information

Name(s): \_\_\_\_\_

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

## Address

P.O. Box: \_\_\_\_\_

Street: \_\_\_\_\_

Town: \_\_\_\_\_

Postal Code: \_\_\_\_\_

## Programs Registered For

Minor \_\_\_\_\_ Female \_\_\_\_\_

Female & Minor \_\_\_\_\_ Rep Tryouts \_\_\_\_\_