



5th Annual Cochrane Crunch Hockey School Registration Form

Date: August 20th — August 24th 2018

Time: 9:00am to 4:00pm Daily Monday to Friday

Location: Tim Horton's Event Center

Lunches and Practice Jersey s Included in Registration Fee

Please Note: This hockey school will be geared to a structured and high intensity day.

Age Divisions: Novice 7&8, Atom 9&10, PeeWee 11&12, Bantam 13&14

Accepting 18 Players and 4 Goalies per age division

Player Name: _____

Address: _____

Player DOB: _____

Phone Number: _____

Age Division: _____

Health Card Number: _____

Emergency Contact #1: _____

Emergency Contact #2: _____

Sate Price before July 27th, 2018, 2018 \$275.00

After July 27th, 2018 Regular Price \$325.00

Method of Payment Cash, Credit Card or Cheque Deadline for Registration is August 13th Cheques made payable to Cochrane Crunch

Credit Card _____ Exp _____ Security code: _____ Postal Code: _____

Name of Cardholder: _____

Questions please contact Ryan Leonard 705-272-5084 ext. 4 or 705-257-0132 Email: cochranechunch@hotmail.com