



Norman Wild

Female Bantam AAA

Pre-Registration Form



Registration Aug. 26, 10 a.m. Whitney Forum

Try-Out Fee: \$125 Due at registration

Fee includes mandatory Hockey MB insurance

Name of Player: _____ Date of Birth: ____/____/____
D M Y

First Year Bantam

 Second Year Bantam

Player Position: _____

Player Shoots: _____

Player Contact Information: _____ (Cell) E-mail: _____

Medical Health Registration # (6 Digits): _____ PHIN# (9 Digits): _____

Contact Information:

Mother: _____ Father: _____

Address: _____ Address: _____

Phone: _____ (H) Phone: _____ (H)

_____ (C)

_____ (C)

E-mail: _____

E-mail: _____

Please return complete preregistration forms to:

Mail: Karl Steppan

P.O. Box 1153

The Pas MB R9A 1L2

E-mail: ksteppan@mymts.net