

Director or local contacts.

Thank you.

2017/2018 Female <u>PEEWEE</u> Prospects Program REGIONAL PRE-REGISTRATION FORM

REGIONAL PRE-REGISTRATION FORM

2nd year – Female Peewee Players Born in 2005

1st year – Female Peewee Players born in 2006

Name:									
Address:	_	Date of Birth:							
City:	Province:	Manitoba		Code	e: _				
Telephone:	E-Mail:								
2016 /17 Team:									
Position:		_							
Height:	Weight:		Shot:	_	L	or	R		
In Case of Emergency:									
Contact:	I	Relation:							
Telephone:	Alternate	Number:							
Medical Number:	Personal Health N	lumber:							
Please fax or email the P	re-Registration Form to:								
Region	Contact	Fax N	Number	and E	E-mai	il			
Norman	Ron LaRocque	204-6	323-6250)					
	Mts 204-620-0611	ron.larocque@ckpi.com							
If you have any question	ons regarding the Female Peewe	e Prospec	ts prog	ram,	plea	se co	ntact y	our F	Regional