

Arena Pro Men's Hockey
Team Registration Form

Team Name: _____ Sweater Colour: _____

Team Rep: _____ Home Phone #: _____

Address: _____ Work Phone #: _____

City: _____ Fax #: _____

Province: _____ Postal Code: _____

Alternate Team Rep

Alt Rep Name: _____ Home Phone #: _____

Season:

Summer Winter

Location:

Brampton Mississauga

Day:

Sunday AM Sunday PM Tuesday Wednesday Thursday

Age:

19+ 30+ 35+ 40+ 50+ 60+

Division:

B C CC D

Payment Information:

Amount: _____ Cash Cheque

\$1000.00 DEPOSIT REQUIRED AT TIME OF REGISTRATION

Notice:

Upon registration you will receive a registration package. Included will be a team roster, which MUST be completed by the first game, and regulations for payment of outstanding registration fees. Failure to submit a completed roster form, or failure to comply with payment regulations will make your team ineligible to play. **NO TEAMS WILL BE PERMITTED ON THE ICE UNTIL ALL PAPERWORK IS COMPLETE!**

Notice To Team Reps:

- Roster sheets with names and sweater numbers required by the first game

