



QUESNEL MILLIONAIRES



Junior "A" Hockey Club

"A Division of the Quesnel Millionaires Hockey Limited Partnership"

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Spring Camp 2010 Registration Form

Name: _____ City: _____

Mailing Address: _____ Province/State: _____

Postal Code: _____ Phone #: (____) _____

Date of Birth: Month: _____ Day: _____ Year: _____

Height: _____ Weight: _____ Shoots (L/R): _____

Preferred Position: _____ E-Mail Address: _____

High School Attended: _____ Grade Completed: _____

Average Mark (GPA): _____ Last Team Played for: _____

Coach Name: _____ Phone #: _____

Previous Years Stats: (G) _____ (A) _____ (PTS) _____ (PIMS) _____

Medical Insurance #: _____ Province: _____

Camp Jersey Size (circle one): M L XL XXL Goalie: L XL XXL

Payment Option (please circle one): Cash Cheque Visa Master-Card

Card Number: _____ Exp. Date: _____

Signature _____ Card Holder Name: _____

Emergency Contact:

Fathers Name: _____ Phone Number: _____

Mothers Name: _____ Phone Number: _____