

Parent/Guardian Signature:

STETTLER MINOR HOCKEY ASSOCIATION REGISTRATION FORM 2017-2018



	NAAA.								
						Ci	rclo		
DATE OF BIRTH: ALBERTA HEALTH CARE #:			AGE:		Circle MALE / FEMALE				
	ERTIFICATE # (NEW PLAYERS):				-	WIALL /	ILIVIALL		
BINTITO	MAILING ADDRESS:					-			
	MAILING ADDICESS.					-			
	LEGAL LAND DESCRIPT	ION (IF BOX NUMBE	ER):						
	Mothers/	Guardian Informati	on		Fatl	her/Guardian	Information		
Name:				Name:					
Phone #:				Phone #:					
	E-mail:				E-mail:				
		C	ircle the approp	oriate age cate	gory			İ	
	Age Groups	Mites	Novice	Atom	Pee Wee	Bantam	Midget		
	Year Born	2012-2011	2010-2009	2008-2007	2006-2005	2004-2003	2002-2000		
	Fees	\$180.00	\$350.00	\$570.00	\$650.00	\$730.00	\$810.00		
	heques will be handled a ires a \$200 fundraising ch	=				-		ation.	
	\$100 Late regist	ration fee will be ap	oplied to any rea	gistrations rece	eived after June 3	30th. 2017			
Cancellation	ns: Registrations that are	•		=			the registratio	n fee	
		PAYMENT OPTIONS							
Online registration (\$5 Fee)				In person Registration Night					
Online Registration is Credit Card only									
1 lump sum payment at the time of Registration					Cash payment - I	IN FULL			
Payr	ment plan - 3 payments o	on the following dat	es:						
July 1				E-Transfer - IN FULL					
August 1					Send E-transfer to: stettlerminorhockeytreasurer@gmail.com				
Septemebr 1					Password: hockeyfees				
					E - '	Transfer Conf	irmation/Refe	ence #	

in registration form with confirmation information on form