

PROMISSORY NOTE for payment

ETRANSFERS

Player's Last Name: _____

First Name/s: _____

I/We _____ promise to send e-transfers or pay in person on the dates and in the amounts listed below to gpmha5@gphockey.com until the full amount of \$ _____ is paid in full.

\$ _____ dated: _____, Dep _____

\$ _____ dated: August 15, 2020 Dep _____

\$ _____ dated: September 15, 2020 Dep _____

\$ _____ dated: October 15, 2020 Dep _____

\$ _____ dated: November 15, 2020 Dep _____

\$ _____ dated: December 15, 2020 Dep _____

If your etransfer is not received on the day indicated it will be treated as an NSF payment and a \$ 45.00 charge will apply. Dishonored payments will suspend the player's registration.

Dated at Grande Prairie this _____ (Date)

Parent: _____

Print Name

Office: Dep _____

Signature