PROMISSORY	NOTE for payment	EIRANSFERS	
		Player's Last Name:	
		First Name/s:	
I/We		promise to send e-tr	ansfers or
pay in person on	the dates and in the amounts listed	below to gpmha3@gphockey.com until the	full amoun
of \$	otal Registration	is paid in full.	
\$	dated: June 30, 2024	Dep	
\$	dated: July 31, 2024	Dep	
\$	dated: August 31, 2024	Dep	
\$	dated: September 30, 2024	Dep	
•	is not received on the day indicated vill apply. Dishonored payments with	l it will be treated as an NSF payment and all suspend the player's registration.	1
Dated at Grande	Prairie this	(Date)	
Parent:		Office: Dep	
Signature			
Phone # for pare	nt		