

Team Management Form

COMPLETE THE FORM AND E-MAIL TO: hriregistration@hockeyregina.ca

TEAM NAME:	DIVISION:	TIER:
Monarchs, Blues etc.	U18, U11 etc.	AA, A, B, C, Female (leave blank for Initiation)

	LAST NAME	FIRST NAME	E-MAIL ADDRESS	CONTACT PHONE#
MANAGER				
MANAGER'S CHILD				
Only if applicable				
CO-MANAGER				
CO-MANAGER'S CHILD				

	LAST NAME	FIRST NAME	E-MAIL ADDRESS	CONTACT PHONE#
TREASURER				
TREASURER'S CHILD				
Only if applicable				
CO-TREASURER				
CO-TREASURER'S CHILD				

	LAST NAME	FIRST NAME	E-MAIL ADDRESS	CONTACT PHONE#
COVID TEAM REP				
COVID TEAM REP'S CHILD				