

Team Management Form

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

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