

# Team Registration for On Ice Helpers

Team Name \_\_\_\_\_

Division \_\_\_\_\_ Category \_\_\_\_\_ Date \_\_\_\_\_

ALL On Ice Helpers must have the Respect in Sport Activity Leader/Coach online course.

|         |            |               |
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| Name    | Position   | Date of Birth |
| Address | Province   | Postal Code   |
| City    | Home Phone | Cell Phone    |
| Email   | Programs   |               |

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Please email completed form to [office@lloydminsterminorhockey.com](mailto:office@lloydminsterminorhockey.com)

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