

Registration Form

PUCKS 'N POWER

- NOVICE/ATOM** September 6, 13, 20, 27 and October 11, 18
 ATOM/PEEWEE September 7, 14, 21, 28 and October 12, 19

POWER HOUR

- NOVICE/ATOM**
 Fall October 17, 24, November 7, 14, 21, 28 and December 5, 12
 Winter January 9, 16, 23, 30, February 6, 13, 27 and March 5
- ATOM/PEEWEE**
 Fall October 25, November 1, 8, 15, 22, 29 and December 6, 13
 Winter January 10, 17, 24, 31 and February 7, 14, 21, 28

POWER PRACTICE - BOOK YOUR TEAM!

- | FALL - Wed. | FALL - Thurs. | WINTER - Wed. | WINTER - Thurs. |
|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> October 12 | <input type="checkbox"/> October 13 | <input type="checkbox"/> January 4 | <input type="checkbox"/> January 5 |
| <input type="checkbox"/> October 19 | <input type="checkbox"/> October 20 | <input type="checkbox"/> January 11 | <input type="checkbox"/> January 12 |
| <input type="checkbox"/> October 26 | <input type="checkbox"/> October 27 | <input type="checkbox"/> January 18 | <input type="checkbox"/> January 19 |
| <input type="checkbox"/> November 2 | <input type="checkbox"/> November 3 | <input type="checkbox"/> January 25 | <input type="checkbox"/> January 26 |
| <input type="checkbox"/> November 9 | <input type="checkbox"/> November 10 | <input type="checkbox"/> February 1 | <input type="checkbox"/> February 2 |
| <input type="checkbox"/> November 16 | <input type="checkbox"/> November 17 | <input type="checkbox"/> February 8 | <input type="checkbox"/> February 9 |
| <input type="checkbox"/> November 23 | <input type="checkbox"/> November 24 | <input type="checkbox"/> February 15 | <input type="checkbox"/> February 16 |
| <input type="checkbox"/> November 30 | <input type="checkbox"/> December 1 | <input type="checkbox"/> February 22 | <input type="checkbox"/> February 23 |
| <input type="checkbox"/> December 7 | <input type="checkbox"/> December 8 | <input type="checkbox"/> February 29 | |
| <input type="checkbox"/> December 14 | <input type="checkbox"/> December 15 | | |

TRY OUT PREP

- March 1 March 6 March 7 March 8 March 12
 March 13 March 14 March 15 March 19 March 20
 March 21 March 22

Name: _____

M F Birthdate (d/m/y): _____ / _____ / _____

Address: _____

City/Province: _____

Postal Code: _____

Tel: _____ Other Tel: _____

E-mail: _____

Send me e-mail updates Yes No

Parents' Names: _____

Level of Hockey Played: _____

Position: _____

Alberta Health #: _____

Method of Payment

MasterCard Visa Amount: _____

Card #: _____ Exp: _____

Name on Card: _____

OR

Cheque # _____ Cash \$ _____