



**REGINA REBELS FEMALE MIDGET AAA
2018 SPRING CAMP
REGISTRATION FORM**

PLAYER INFORMATION

NAME: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____

Player E-MAIL ADDRESS: _____

BIRTHDATE (mm/dd/yy): _____ HEIGHT: _____ WEIGHT: _____

POSITION TRYING OUT FOR: 1. _____ 2. _____ SHOOTS (LEFT / RIGHT): _____

LAST TEAM PLAYED FOR: _____ LAST COACH: _____

PARENT(S) INFORMATION

FATHER'S NAME: _____ Cell PHONE: _____

Father E-MAIL ADDRESS: _____

MOTHER'S NAME: _____ Cell PHONE: _____

Mother E-MAIL ADDRESS: _____

I hereby acknowledge that any subsequent intent to withdraw from the Regina Rebels 2018 Spring Camp must be submitted via e-mail to: sandy.kosteniuk@fcc.ca by March 29th, 2018. Full refunds will be provided for cancellation notices received prior March 29th, 2018. No full or partial refunds will be issued after this deadline without a valid doctor's certificate.

PARENT'S SIGNATURE: _____

This registration form – with full payment – must be completed, signed, and submitted prior to the registrant being permitted to enter the ice for the first time. To ensure a spot in this year's camp, registration and payment must be received by March 29th, 2018.

Email **SIGNED** registration form to: sandy.kosteniuk@fcc.ca, AND
E-transfer \$150 to: lshastings@sasktel.net, password <rebels> and **Message to recipient**
<player first last name> as written on the registration form.

Pride Passion and Purpose!

www.ReginaRebels.ca