

# Quinte Children's Fun Day Four on Four Ball Hockey Registration Form

Registration Fee: \$50.00 per team

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

Team contact name and email \_\_\_\_\_

Team Age Category:     6-7  
(please circle)         8-10  
                                  11-12  
                                  13-15

## Player's Information:

Player's Names

Birth Date:

1) _____	_____
2) _____	_____
3) _____	_____
4) _____	_____

## Parent/Guardian Contacts:

1)Name: \_\_\_\_\_ Contact #

\_\_\_\_\_

email: \_\_\_\_\_

2)Name: \_\_\_\_\_ Contact #

\_\_\_\_\_

email: \_\_\_\_\_

3)Name: \_\_\_\_\_ Contact #

\_\_\_\_\_

email: \_\_\_\_\_

4)Name: \_\_\_\_\_ Contact #

\_\_\_\_\_

email: \_\_\_\_\_

Waivers must be attached with monies

Contact information PC Miranda Orr 613-966-0882 ext 2228 or Robin

Boomhower 613-969-8861