

# Central Plains Regional Hockey

## 2011 Registration Sheet

<b>Given Name:</b>		<b>Last Name:</b>	
<b>Date of Birth:</b>	<b>Parents:</b>		
<b>Address:</b>			
<b>City/Town:</b>		<b>Postal Code:</b>	
<b>Phone Numbers:</b>		<b>Email:</b>	
<b>Medical Numbers:</b>			
<b>Medical Conditions or Concerns:</b>			
<b>Minor Hockey Association:</b>		<b>Last Team:</b>	
<b>Position: Center</b> (Highlight all that apply)	<b>Wing</b>	<b>Defense</b>	<b>Goal</b>
<b>Shot : Left</b>	<b>Right</b>		

