

# PLAYER INFORMATION FORM

**Important Notice:** Please complete the following form and save it to your computer to be sent as an attachment to your eMail. Unfortunately there may be some instances where this may not be possible, where you may have to print out a blank form to be completed by hand and forwarded as an attachment or by regular mail, or fax to 250 -748-9938.  
We apologize for any inconvenience this may cause.

**Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City/Town:** \_\_\_\_\_ **Province/State:** \_\_\_\_\_

**Postal Code:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Home Phone #:** (\_\_\_\_) \_\_\_\_\_ **Cell Phone #:** (\_\_\_\_) \_\_\_\_\_

**Date of Birth:** (M) \_\_\_\_\_ (D) \_\_\_\_\_ (Y) \_\_\_\_\_ **Age:** \_\_\_\_\_

**Height:** \_\_\_\_\_(Feet) **Weight:** \_\_\_\_\_(Lbs.) **Medical #:** \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ **Daytime Phone #:** (\_\_\_\_) \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ **Daytime Phone #:** (\_\_\_\_) \_\_\_\_\_

**09-10 Team:** \_\_\_\_\_

**Coach's Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**Position:** \_\_\_\_\_ **Shot:** Right \_\_\_\_\_ Left \_\_\_\_\_

**Describe the type of player you are:**

\_\_\_\_\_

\_\_\_\_\_

**GP:** \_\_\_\_\_ **G:** \_\_\_\_\_ **A:** \_\_\_\_\_ **Pim:** \_\_\_\_\_

**GP:** \_\_\_\_\_ **Avg:** \_\_\_\_\_ **%:** \_\_\_\_\_ **W/L:** \_\_\_\_\_

**Hockey Achievements:** \_\_\_\_\_

**Hockey Ambition:** \_\_\_\_\_

**T-Shirt Size (S)**\_\_\_\_\_ **(M)**\_\_\_\_\_ **(L)**\_\_\_\_\_ **(XL)**\_\_\_\_\_

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