



## ZONE 3 WINTER GAMES TRYOUT FORM

PLEASE PRINT

Player's name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Birthdate \_\_\_\_\_ Care Card # \_\_\_\_\_

E-Mail \_\_\_\_\_

Home phone \_\_\_\_\_ Years played \_\_\_\_\_

Parent/Guardian name's \_\_\_\_\_

Emergency contact person & number \_\_\_\_\_

Current level of play & Association \_\_\_\_\_

Position \_\_\_\_\_

Payment / \$50.00                  Cheque \_\_\_\_\_ Cash \_\_\_\_\_