2024/2025 U15 Major ID Camp May 17-19, 2024 – KMCC / Andrew H. McCain Arena Registration Form

Player Name:				
Date of Birth(day/month	/year):			
Address:		City:		X,
Home Phone#:	25	Postal Code:		
Parent's Cell(s):			4	
Parent's Email(s):	- J			
Parent's Names:			Falls	
	Mother		Father	
Health Card#:	7			_
Position (circle): Goalie Forward Defence				
Shot (circle): Left	Right			
Height (feet/inches): Weight (lbs):				
Last Year Team:	3	1	1	
Medical Concerns:				

Registration forms & payment must be submitted via email by May 12, 2024 to:

Rhonda Baxter – rlb@baxtergroup.ca

Cost: \$160.00

All Cheques must be mailed or paid at registration made payable to: Valley Wildcats

E-Transfer: rlb@baxtergroup.ca

Receipts will be issued at camp.