



BRUNSWICK JUNIOR HIGH SCHOOL HOCKEY CLUB
REGISTRATION FORM for 2016-2017 • brunswickhockey.org

____ NEW PLAYER ____ RETURNING PLAYER ____ GRADE

LAST NAME: _____ FIRST NAME: _____

DATE OF BIRTH ____/____/____ MALE / FEMALE

ADDRESS: _____

CITY: _____ ZIP: _____

Parent/Guardian Name: _____ MOBILE PHONE: _____

E-MAIL _____

Parent/Guardian Name: _____ MOBILE PHONE: _____

E-MAIL _____

USA HOCKEY REGISTRATION #: _____ (only if you have not registered on the SMMSHL.com website)

Program Fees: \$270 per player for B Team – \$295 for A Team
PLEASE MAKE CHECKS PAYABLE TO “BJHS HOCKEY CLUB”
****ALL FEES DUE IN FULL AT TIME OF REGISTRATION** 10% discount for additional siblings. Fees are non-refundable.**

LAST YEAR'S POSITION: GOALIE _____ DEFENSE _____ FORWARD _____

I understand that all skaters are responsible for taking care of, and returning, jerseys at the conclusion of the season. Those who do not will be assessed a \$200 charge. I will go over the “Goals and Objective” document with my player when it is handed out

Signature of Parent or Guardian _____ Date _____

REGISTRAR USE ONLY

CASH PAID: \$ _____ CHECK AMOUNT \$ _____ CK# _____

REC'D BY _____ DATE: ____/____/____

3 Forms

USA Hockey Code of Conduct () USA Hockey Consent to Treat () USA Hockey Waiver of Liability ()

Equipment

Jersey # _____ Socks _____ Practice Jersey _____