Faustina Hockey Club

Group 3 Faustina Hockey ClubSive y2018 Future Starz Hockey School Registration Age 9,10 years old & up

Name of Player: Last name			,	, Birth Date://			
		Last name	First nan	ne	YYYY/ MM /	DD	
Home Tel.()		or Email Ac	ldress			
					r responsible for any (are) involved with this	clinic.	
					arz Hockey School.	,	
Cash \$	(Credi	t Card \$	On Line: \$	Balance \$		
Received By		Faustina Coach / C	lub Member	Date			
Parent or Guardian Sign				Date			
⊁ Detach	and Keep	Bottom for vour	r receipt Portion	when Registering	3		
Faustina Ho 2018 Hocke	ockey Clu	b			Balance;		
Cost:	\$ 275	.00 Make C	Cheque payable t	o: Faustina Ev	n must be handed in tog <mark>/ents</mark> Die until April 1 st /	-	
Includes:	Faustina Hockey School Sweater (Must be worn at all times) On ice instruction from Faustina Hockey Club Coaches 10 hours of Sweat, Skills, Improvement and Fun						
Location:	MasterCard Centre 400 Kipling Ave.						
	Dates and times are subject to change.						
	Please check Faustina web site to print complete Group # 3 Schedule						
Session Dates:	Thursday evenings (8:00 – 9:00 pm) and Saturday mornings (10:00 – 11:00 am) Sept,6,8,13,15,20,22,27,29. Oct. 14,11.						
NOTE:	There are only a limited number of players per Group. Participants will be taken on A <u>first come / first serve basis</u> until the clinic is full. Sweaters will be given out at the first session and MUST be worn to participate in each session.						
	You will NOT be contacted before the first session. If you are registered, please keep and pothis schedule / receipt .					e keep and post	
	For more information visit our web site at www.faustinahockey.com						
	Faustin Registra	a Instructors ha ation forms are	we the option to	a Faustina mem	tolen articles. ased on ability to anoth ber with full payment .	er group.	

Group 3