



CHIROCARE KINGS HOCKEY CLUB REGISTRATION FORM

Must be received by May 5th, 2017



Registration form may be dropped off in office or scanned and emailed (see free scannable app for mobile devices)

Spring Camp Dates: Tue. April 10th 9:00pm-10:30pm / Wed. April 11th 9:00pm-10:30pm / Thurs. April 12th 9:00pm-10:30pm @ Sackville Arena

PLAYER INFORMATION (Off-ice)

Player's last name:	First:	Middle:	Birth date: / /	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	Age:
Street address:					
City:	Province:	Postal Code:	Home phone no.: ()		
email address:			Cell phone no.: ()		
alternate email address:			Alternate phone no.: ()		

PLAYER INFORMATION (On-ice)

Position:	Height / Weight /	2017-2018 Team		Shot (Left or Right):	
Helmet Size: S / M / L / XL	Glove Size: 13" / 14" / 15"	Track Jacket Size: XS / S / M / L / XL / XXL	Track Pant Size: XS / S / M / L / XL / XXL	T-Shirt Size XS / S / M / L / XL / XXL	

IN CASE OF EMERGENCY

Name of local friend or relative	Relationship to Player:	Home phone no.: ()	Work phone no.: ()
_____ <i>Player/Guardian signature</i>		_____ <i>Date</i>	
Health Card No:			

PAYMENT INFORMATION

Spring ID Camp fee of \$100 can be made via: Cash (iDay 1 / in advance in office), e-transfer (info@chirocarekings.com), or credit card (\$110 in office)

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