



2023-24 JUNIOR LEAGUE REGISTRATION FORM

LEAGUE NAME: _____

ADDRESS: Street/Box: _____ City/Town: _____

Postal Code: _____ Website: _____

PRESIDENT: _____ Telephone: _____

ADDRESS: Street/Box: _____ City/Town: _____

Postal Code: _____ Email: _____

SECRETARY: _____ Telephone: _____

ADDRESS: Street/Box: _____ City/Town: _____

Postal Code: _____ Email: _____

REFEREE-IN-CHIEF: _____ Telephone: _____

Email: _____

OTHER EXECUTIVE (Please list)

League Membership Fee:\$25.00

PAYMENT TYPE

Attach cheque or provide credit card information and email or mail to the Hockey Saskatchewan office.

Please Circle Type of Credit Card: Visa MasterCard

Credit Card Number _____ - _____ - _____ - _____ Expiry Date ____/____

SHAPING CHARACTER FOR LIFE... MORE THAN A GAME.