HOCKEY NEWFOUNDLAND & LABRADOR
MINOR HOCKEY REGISTRATION FORM

Please print clearly. Provide all information requested.
Each team must have at least one on-bench official registered.
Minimum of one on-bench official per 17 players.
On-Bench Officials must have appropriate certification.
List players on this form who are in the same division.
Submit **full payment** with forms to avoid disapproval.
MAKE SURE YOU HAVE NOT OVERLOOKED ANY PLAYERS.

SEASON

_____

HOCKEY CANADA
NATIONAL INSURANCE LISTINGS

Use additional forms for players registered later. Do not use light blue ink.
Box 176, Grand Falls-Windsor, NL A2A 2J4
We will return a signed copy as confirmation of registration.
NO PLAYER CAN BE REGISTERED AFTER FEBRUARY 10.
Players must be registered before they play.
PLEASE ENSURE OPT-IN PHRASE #2 IS COMPLETED & ATTACHED FOR EACH REGISTRAINT.

_____ **MINOR HOCKEY ASSOCIATION**

_____ **ADDRESS**

_____ **DIVISION (i.e. Atom, PeeWee)**

SURNAME	FIRST NAME	M/F	DATE OF BIRTH	PHONE #	E-MAIL	STREET ADDRESS	TOWN	POSTAL CODE	MCP #
1.									
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									
11.									
12.									
13.									
14.									
15.									
16.									
17.									
									Certification
Coach									
Asst. Coach									
Trainer									
Manager									

Minor Hockey Association Rep.
(Please print)

_____

_____
Signature

Please provide mailing address

_____

_____

_____

_____

THIS SPACE FOR HNL OFFICE ONLY
Date Rec'v.: _____
Payment Rec'v.: _____
Receipt #: _____

H.N.L. REGISTRAR APPROVAL