



Warwick Township

March Break 3 on 3 Hockey Tournament

Registration Form

Team Name: _____

Team Contact/Coach/Manager: _____

Player	Date of Birth	Highest Level Played in 2018/19
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Team Contact: _____

Phone #: _____

Email: _____

Address: _____

Please circle **Division** you wish to participate in:

Atom

Pee Wee

Bantam

Please circle the **Level** you wish to participate in:

Competitive

Non-Competitive

Submit completed form by email to watfordarena@warwicktownship.ca
or by fax to 519-876-3531.