•	Merritt Centennials Junior 'A' Hockey Club P.O. Box 1730 • Merritt, BC • V1K 1B8 • (250) 378-3604 www.merrittcentennials.com					
	HOCK	XEY SCHOOL 20	19-please prir	nt clear and neatly		
Name	Last	Fin	rst	Middle		
DOB		Position Shot List preferred positon				
Last Year's Team		Level_		Jersery size	youth-adult	
Parents Names	Parents Cell					
Address		City		Province/State		
PC/Zip	email	_ email Medical #				
Medical/ Allergies	Precautions					
Age Group Registe	ering For6-9	10-1213	-15Emer	gency Contact		
And agree that th Nor held response Damages. We fur We will be respon	e staff, coach's ble for any acc ther agree that nsible for all mo	, instructors, along ident or loss, how the applicant has i edical and dental c	g with the ice a ever caused an no medical pro claims, or insu	accept the te arena and its employees nd agree to release same oblems and is in good pl arance.	are not hable for, e from all claims or hysical health and	
Signature			Date			
Payment Informat Name On Credit C Card Number	ion- Card		Players Na Expiry	ame CVC		
Visa—Master Car		Express	1 2			