



Saint Mary's Hockey Camp Registration Form July 8-14, 2018



Player's Name: _____

Parents' Names: _____

Address: _____

City, State, Zip: _____

Home phone: (_____) _____

Day Time phone: (_____) _____

Email Address: _____

Birth Date: ____/____/____ Position (circle): Goal Defense Forward

T-Shirt Size (Circle): AS AM AL AXL AXXL Jersey Size: AM AL AXL AXXL Goalie-Cut

Roommate Choice (If you have one - Only 2 People Per Room) _____

How did you find out about the Saint Mary's Hockey Camp? _____

Camp Enrollment (Check Appropriate Groups – Age is what level they will play next season):

Resident Programs (Skater \$945/Goalie \$545)

- ____ Bantam Skater - Resident
- ____ Bantam Goalie – Resident
- ____ Midget/High School Skater – Resident
- ____ Midget/High School Goalie – Resident

Commuter Programs (Skater \$845/Goalie \$445)

- ____ Bantam Skater - Commuter
- ____ Bantam Goalie - Commuter
- ____ Midget/High School Skater - Commuter
- ____ Midget/High School Goalie - Commuter

NOTE: Resident players will stay on campus and eat all meals at the cafeteria. *Commuter players will not stay on campus, but will eat all meals at the cafeteria.*

Discounts:

Returning Participant Discount: \$50 discount for participation in any hockey camp hosted at Saint Mary's University

Returning Player Discount: Circle One: YES OR NO

For credit card or debit cards:

Credit Card # _____ Security # (3 digit on back) _____

Signature _____ Expiration Date _____



**Send Registration Form & Make Checks Payable to:
Saint Mary's Hockey Camp
700 Terrace Heights #62
Winona, MN 55987**

Send registrations in early. Space is very limited.

For more information, please call Bill Moore at (651) 442-7306 or email at saintmaryshockeycamp@gmail.com.