



Goalie Reimbursement Form

Date Submitted: _____

Player Name: _____

Parent(s) Name: _____

Address: _____

Email: _____ Team: _____

Goalie Participation Reimbursement: \$100 will be given for full time registered goalies only, at the Squirt, Girls 10U, PeeWee, Girls U12 and Bantam levels. Reimbursement checks will be issued at the end of the season in April.

Goalie Camp Reimbursement: Up to \$200 will be given for players who attend a "GOALIE" camp the summer before the season starts for players in Squirts, Girls 10U, Girls U12, PeeWees and Bantams. A copy of the camp receipt must be submitted with the completed form for reimbursement. You will receive the amount paid, up to \$200.00. Checks for reimbursement will be issued from the Association in November.

NOTE: You may request both reimbursements.

Check all that apply		Description	Requested Amount	Office Use Only
	Goalie Participation Reimbursement	Registered Goalie for season (\$100.00)		
	Goalie Camp Reimbursement	Goalie Camp Reimbursement Goalie camp registration receipt required (up to \$200.00)		

Mail completed form to:

Bulldog Hockey Association
 PO Box 157
 St. Peter, MN 56082