



**2018-19 Flin Flon Minor Hockey Midget ID
March 17-21
PLAYER PROFILE/REGISTRATION FORM**



Name _____

Date of Birth D _____ M _____ YR _____ Medical # _____

Players Cell # _____ Home Phone # _____

E-mail Address _____

Parents' Names _____

Parents' Email Address _____

Position _____ Shoots - Left _____ Right _____

Most Recent Team _____ Year _____

Please Circle:

Are you attending any other Spring/Fall Midget Camps **YES NO**

If yes, please list

Camp: _____ Date: _____

Camp: _____ Date: _____

Camp: _____ Date: _____

Camp: _____ Date: _____

Previous Injuries/Medical Issues:

Cost of camp is \$10. Please make cheques payable to Flin Flon Minor Hockey.