



2021/22 Directors Cup Prospects Program REGIONAL PRE-REGISTRATION FORM

1st year – Male Bantam Born 2008

Name:				
Address:		Date of Birth:		
City:	Province:	Manitoba	Code:	
Telephone:	E-Mail:			
2020 /21 Team:				
Position:		_		
Height:	Weight:	Shot:	L or F	₹
In Case of Emergency:				
		Relation:		
Telephone:	Alternate	Number:		
Medical Number:	Personal Health I	Number:		
Please email the Pre-Reg	istration Form to:			
Region	Contact	E-mail		
Norman	Brett Pearson 1 (204) 271-2182	Email – <u>1</u>	prett.pearson@hudba	yminerals.com
		ron	.larocque@ckpi.com	1

If you have any questions regarding the Male Bantam Directors Cup program, please contact your Regional Director or local contacts.

Thank you.