



Brooks Minor Hockey

Box 2002 Brooks, AB T1R 1C7
403-362-8215

www.brooksminorhockey.com bmhadmin@telus.net



2022 U11 HAPD Registration Form

Child's Name: _____

Address: _____

City: _____ Postal Code: _____

Email: _____

Date of Birth: _____

HCR#: _____

Guardian Info:

Name(s): _____

Phone (1): _____ Phone (2): _____

Email (1): _____

Email (2): _____

Acknowledgements:

I acknowledge all participants, guardians and family of the registered player will be subject to the Brooks Minor Hockey Code of Conduct as found at www.brooksminorhockey.com

I Acknowledge the tryout fee must be paid in full before the player(s) are allowed on the ice. Fee is \$20 for local participants registered with Brooks Minor Hockey and \$40 for players from other LMHA's. Local players must be registered with BMHA

Submit Forms to: vpjrbandits@brooksminorhockey.com