

Kitchener-Waterloo Siskins Jr. Hockey 2024 Prospect Camp April 26-28, 2024 Waterloo, ON

Name:		DOB:		
Address:				
Player E-Mail Address:		Player Phone	Player Phone No.:	
Parent Guardian Name(s):				
Parent/Guardian E-Mail:		Phone:	Phone:	
Previous Team:				
Position:	Shoots:	Height:	Weight:	
Previous Team Coach / Contact (Phone):			
Players Signature:				
Parent's Signature (if under 18):				
If attending post-secondary scho	ol locally for 2024-2025 se	eason, where?		

Please include this form and Medical Form, duly completed to brian.j.huddle@gmail.com

Registration will be confirmed with \$320 payment made to kwsiskinshockey@gmail.com

Management of the Kitchener-Waterloo Siskins Hockey Club reserves the right to select the participants for this camp. Each player will be notified via email when accepted.

Cancellation Policy: No Refund unless spot is filled with replacement player.

The above applicant will not hold the owners and staff of Kitchener-Waterloo SIskins liable/responsible for damages, loss or injury which may occur and hereby release Kitchener-Waterloo Siskins from any action which may occur while attending Prospect Camp. This release covers traveling to and from the arena as well as any all activities on and off the ice.