

HOCKEY MONTREAL INTERNATIONAL

Summer 2017 Registration form

Glenn J. Chamandy arena (LCC)

August 7-11, 14-18 only @ Jacques Lemaire arena, Lasalle

PLEASE CHECK THE PROGRAM AND WEEKS SELECTED

<u>PROGRAM :</u>			
JUNIOR CAMP		ELITE FWD + DEF CAMP	
SENIOR CAMP		GOALIE CAMP	
CIT PROGRAM			
		Extended Day Service \$25.00	
<u>DATES :</u>			
JUNE 26-30		JULY 24-28	
JULY 3-7		JULY 31-AUG 4	
JULY 10-14			
JULY 17-21		AUGUST 21-25	
AUGUST 7-11		AUGUST 14-18	
BUS SERVICE \$25.00		BUS SERVICE \$25.00	

Hockey Montreal Intl. reserves the right to place players according to their skill level

Player: _____

First name Family name

Address: _____

Street City

Prov./ State Postal code/Zip

Medicare #: _____ Expiry: _____

E-MAIL: _____

Home telephone#: _____

Birth Date (M/D/Y): _____

Hockey Level 2016-17: _____

Parent 1: _____

Tel. work: _____ Cell: _____

Parent 2: _____

Tel. work: _____ Cell: _____

The undersigned agrees that Hockey Montreal Int., its employees and agents, nor Sodem Inc. will not be held responsible for any accidents or loss, however caused, and hereby releases each of them from all claims and damages, which may arise as a result or by reason of such accident or loss. There are no refunds for cancelled weeks.

Signature: _____ Date: _____

**Payable to: HOCKEY MONTREAL INT.
4950 Borden Ave.
Montreal, Quebec, H4V 2S8**