

ENTRY FORM

PLEASE PRINT

TEAM NAME: _____

COMMUNITY REPRESENTING: _____

AFFILIATION(O.M.H.A., G.T.H.L., ETC.): _____

CLASSIFICATION: (CIRCLE) AAA AA A BB B CC C DD D E

TEAM CONTACT: _____

ADDRESS: _____

POSTAL CODE: _____ **TELEPHONE:** _____

DEADLINE

**I MUST HAVE THIS FORM, TEAM ROSTER &
REGISTRATION PAYMENT BY DECEMBER 1, 2009**

Payable to : Mooretown Silverstick

**** PLEASE INCLUDE A TEAM ROSTER WITH NUMBERS FOR
PUBLICATION IN OUR PROGRAM**

Send to
Rick Harris
258 Moore Line
Mooretown, Ontario
NON 1M0