# Kelvington Hockey School 2012

## July 16th – 19th 2012

**Name: _____ Parents: _____**

**Address: _____ Town: _____**

**Province: _____ Postal code: _____**

**Health card#:_____ E-mail:_____**

**Phone: _____ Fax: _____ Cell: _____**

**Age on Dec.31, 2012_____ Sex: Male/Female (please circle one)**

**Medical Conditions: _____**

**Cost: $150.00 (if pd. By June 1st)**

**$200.00 (pd. After June 1st)**

Register early and save $50.00!

For further information please contact Sherri at 306-327-5159 in the evening or at 306-327-4662 during the day. Fax 306-327-4689 or Email: khockeyschool@hotmail.com

Cheques payable to: Kelvington Recreational Arena

Box 936

Kelvington, SK S0A 1W0