



# GLANCASTER BOMBERS

Name of Registered Player(s):

Address:

Postal Code:

Email Address:

Credit Card Type (Visa, MasterCard):

Card Number:

Month (MM)

Year (YY)

Expiration Date:

CVV:

Name on the Credit Card:

Digital Signature:

\*By entering my name above, I agree to pay the initial \$650 registration fee for Glancaster Bombers Hockey for the 2020-2021 season.