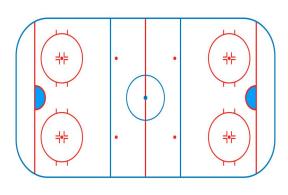


Contact:



## "Increase the Space and Stretch the Ice"

## Team Registration - U9 Year End (Sanction # 14995)

Date: Friday, Ap	oril 4, 2025
Division:	<b>1</b> U9
Team Name:	
Jersey Colour:	
Home Branch:	□ OMHA □ Alliance □ GTHL □ Other
Contact Informati	on:
Manager Name:	
Cell:	Email:
Head Coach:	
Cell:	Email:
Payment of \$1100 can b	e made by etransfer or by cheque. Acceptance into the Tournament is only
confirmed once paymen	t has been made.
<b>Etransfer address:</b>	lpaone@cogeco.ca
Approved rosters and travel pe	ermits must be submitted as soon as possible after acceptance.
Cheques can sent to the below	address:
Leo Paone	
32 Concerto Court, Ancaster,	ON L9G 4V7

Leo Paone (905) 648-4606 lpaone@cogeco.ca