



ICE BREAKER TOURNAMENT

REGISTRATION FORM

Team Centre & Name		
Team Colours	Home:	Away:
Division		
Contact Name		
Contact Phone		
Contact Email		
Head Coach		
Team Manager		

Tournament Convenor: Christina Goulet 613-922-1270

Inquiries: internalconvenor.sdmha@gmail.com

Please forward payment by cheque and completed registration form to:

Christina Goulet

94 Boudrie Rd.

Frankford, ON

K0K 2C0

Cheques should be made payable to Stirling District Minor Hockey Association