

**2008-2009**

**CARMEL ICEHOUND REGISTRATION FORM**

PLEASE PRINT ALL INFORMATION

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ Ht: \_\_\_\_\_ Wt: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ (mm/dd/yy) CITIZENSHIP: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PLAYER E-MAIL \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

PARENT/GUARDIAN (1):

PARENT/GUARDIAN (2):

(1) \_\_\_\_\_  
NAME

(2) \_\_\_\_\_  
NAME

(1) \_\_\_\_\_  
E-MAIL ADDRESS

(2) \_\_\_\_\_  
E-MAIL ADDRESS

(1) \_\_\_\_\_  
HOME PHONE

(2) \_\_\_\_\_  
HOME PHONE

(1) \_\_\_\_\_  
WORK PHONE

(2) \_\_\_\_\_  
WORK PHONE

(1) \_\_\_\_\_  
CELL PHONE

(2) \_\_\_\_\_  
CELL PHONE

SEPTEMBER, 2008 GRADE YOU WILL BE IN: \_\_\_\_\_ SCHOOL: \_\_\_\_\_ \*

\*You must attend Carmel High School to play in the Icehounds program.

YEARS OF EXPERIENCE: \_\_\_\_\_ POSITION: \_\_\_\_\_ SHOOTING SIDE: \_\_\_\_\_

TEAM PLAYED FOR LAST 2 SEASONS: \_\_\_\_\_  
\_\_\_\_\_

COACH PLAYED FOR LAST YEAR: \_\_\_\_\_

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For Registration Use Only:

JERSEY COLOR/NUMBER: \_\_\_\_\_

Paid/Attended:

Pre-skates (fee \$20): \_\_\_\_\_

Tryouts (fee \$55): \_\_\_\_\_

Total: \_\_\_\_\_

PLEASE RETURN FORM TO REGISTRATION ATTENDANT WITH CHECK PAYABLE TO: "CARMEL ICEHOUNDS HOCKEY CLUB".