

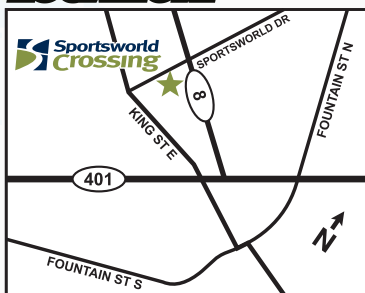
MOOSE WINOOSKI SPRING CUP

APRIL 6-8, 2018

- ★ Friday night starting at 6pm, ending Sunday AT 1pm
- ★ 19 + A, B, C
- ★ 30 +
- ★ 40 +
- ★ Guaranteed 3 games
- ★ Games played at Sportsworld Twin Pad
- ★ Certified Referees
- ★ Great prizes for the winning teams!
- ★ Great hotel deals at the Radisson. (Ask for details)



LOCATION:



PRICING

\$850

Incl. HST
Per Team

Payment due by March 1, 2018

To register, contact Gord Mast

@ 519-829-9591
or gmast@kitchenerhockeydevelopment.com





REGISTRATION FORM (Please print)

Once completed, please fax to 905-336-9311

KAHL MOOSE WINOOSKI SPRING CUP: APRIL 6-8, 2018

I am registering my team for: 19+ A Division 30+ 40+
 19+ B Division
 19+ C Division

Team Rep Name: _____

Address: _____

City: _____ Province: _____

Country: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

Emergency Contact Name & Number: _____

Participant's Date of Birth (yyyy/mm/dd): _____ / _____ / _____

E-mail: _____

Team Name: _____

Tournament Entry Fee: **\$850.00** (includes HST) *Payment due by March 1, 2018*

Payment Options: Cash Cheque (Payable to KAHL) Visa MasterCard

Credit Card #: _____ Expiry: _____ / _____

REGISTRATION CANCELLATIONS ARE SUBJECT TO A \$25 SERVICE CHARGE.

KAHL REQUIRES YOUR PERSONAL INFORMATION TO ESTABLISH AND SERVICE YOUR NEEDS AS A CLIENT. WITH YOUR PERMISSION, YOUR PERSONAL INFORMATION MAY BE COLLECTED, USED AND DISCLOSED BY KAHL FOR THE FOLLOWING PURPOSES: CONFIRMING YOUR APPLICATION INFORMATION AND ASSESSING YOUR ELIGIBILITY FOR PRODUCTS OR SERVICES, PROVIDING YOU WITH ONGOING SERVICES, ESTABLISHING AND MAINTAINING COMMUNICATION WITH YOU AND RESPONDING TO ANY INQUIRIES YOU MAY HAVE, NOTIFYING YOU ABOUT KAHL UPCOMING EVENTS AND ACTIVITIES AND TO MEET LEGAL AND REGULATORY REQUIREMENTS. YOUR CONSENT IS IMPLIED BY YOU FILLING OUT THIS FORM. YOUR PERSONAL INFORMATION WILL BE KEPT ON OUR FILES FOR A MAXIMUM OF 2 YEARS. TO FIND OUT MORE ABOUT OUR LEAGUES PLEASE CONTACT GMAST@KITCHENERHOCKEYDEVELOPMENT.COM I UNDERSTAND THAT I AM PERMITTING WAVE HOCKEY INC. TO USE MY EMAIL ADDRESS FOR COMPANY-RELATED COMMUNICATIONS. I THE UNDERSIGNED AGREE TO ALLOW WAVE HOCKEY INC AND/OR ITS RELATED COMPANIES TO USE THE PARTICIPANTS' NAMES AND OR PICTURES FOR ADVERTISING PURPOSES.

Name: _____ Signature: _____ Date: _____