



MOOSE JAW WARRIORS

P.O. Box 74
Moose Jaw, SK S6H 4N7
P: (306) 694-5711
F: (306) 692-7833
www.mjwarriors.com

MOOSE JAW WARRIORS HOCKEY CAMP REGISTRATION

Last Name: _____ First Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Email Address: _____ Parent's Names: _____

Evening Telephone No.: _____ Daytime Telephone No.: _____

Cell Phone: _____ Birth Date (M/D/Y) _____ Age _____

Age Group (checkmark): 5 – 7 ___ 8 – 10 ___ 11 – 13 ___ Conditioning Camp 14-17 ___

If participating in Conditioning Camp, last year's Team and Level _____

Sex: Male ___ Female ___ Weight: _____ Height: _____

Position: Goalie ___ Defense ___ Forward ___

Have you played league hockey with Full Body Contact: Yes /No

COST OF PROGRAMS

Kids Camp – Sunday, August 13th – Thursday, August 17th, 2017 \$320.00 +GST
Elite Conditioning Camp – Sunday, August 13th – Thursday August 17th, 2017 \$275 +GST
(ONLY 20 SPOTS AVAILABLE FOR CONDITIONING CAMP)

KIDS CAMP BENEFITS:

- 2 hours ice time each day (broken into 1 hour sessions)
- Head Instructor: Warriors Assistant Coaches Mark O'Leary and Scott King, plus current/alumni Warriors
- Receive camp jersey - 1 Adult & 1 Child or Student Ticket to Warriors regular season game

Camp Times:

Warriors Kids Camp: August 13th – 17th 9:00-10:00am/10:15-11:15am/11:30am-12:30pm/12:45-1:45pm/
2:00-3:00pm/3:15-4:15pm **Mosaic Place**

Elite Conditioning Camp: August 13th – 17th 7-9pm **Mosaic Place**



MOOSE JAW WARRIORS



MOOSE JAW WARRIORS

P.O. Box 74
Moose Jaw, SK S6H 4N7
P: (306) 694-5711
F: (306) 692-7833
www.mjwarriors.com

Please remit payment in full with application. Payment non-refundable after July 2nd, 2017.
Please circle whether you are registering for the Kids Camp or the Conditioning Camp

Kids Camp

Conditioning Camp

Payment Method Cheque Money Order Visa/Mastercard Debit

Credit Card # _____ Expiry: _____

Camp registration is limited in each age group and is on a first come, first serve basis.

JERSEY ORDER (KIDS CAMP ONLY) PLEASE CIRCLE ONE:

YOUTH S/M L/XL

ADULT S M L

HOCKEY SCHOOL POLICY

In signing this application, the parent certifies that the child is in good, normal health and has no physical handicaps. The SCHOOL will provide every safeguard for the health and welfare of each child, but will not be responsible for sickness or accidents. We reserve the right to use any picture taken during your child's play at the school for advertising or instructional purposes.

The applicant agrees that the **Moose Jaw Warriors Hockey School** and/or its proprietors will not be held responsible for accidents or loss. I have read and agree to the above conditions.

THE HOCKEY SCHOOL RESERVES THE RIGHT TO CANCEL RESERVATIONS IF FEES ARE NOT PAID AS REQUIRED.

SIGNATURE OF PARENT/GUARDIAN

DATE

THIS SECTION FOR OFFICE USE:

Amount & Method of Payment _____ Date _____

(Faxing instructions: if faxing application, please contact us to ensure the application has been received)

Moose Jaw Warriors
110- 1st Ave. N.W.
Moose Jaw, SK
S6H 3L9

Phone: (306) 694-5711
Fax: (306) 692-7833
Email: rachel@mjwarriors.com
www.mjwarriors.ca



MOOSE JAW WARRIORS

