



WOOLWICH MINOR HOCKEY ASSOCIATION COACHES D1 REFRESHER CLINIC REGISTRATION FORM

EMAIL: hockeyoffice@woolwichminorhockey.ca WEB: www.woolwichminorhockey.ca

NAME: _____ TELEPHONE: _____

ADDRESS: _____

EMAIL: _____ CENTRE: _____

LEVEL/AGE COACHING: _____ PAYMENT AMOUNT: \$ _____

✓ CLINIC	CLINIC	CLINIC DATE	TIME	LOCATION	COST	Woolwich Minor Hockey Coaches
	Coaches D1 Refresher (4 hrs)	Thurs., August 21st	6pm - 10pm	St. Jacobs Fire hall 3 Water St, St Jacobs	\$80.00	\$40.00

WOOLWICH MINOR HOCKEY ASSOCIATION
P.O. Box 204, ELMIRA, ONTARIO N3B 2Z6
TEL: (519) 669-2789

**** CHEQUES CAN BE MADE PAYABLE TO *WOOLWICH MINOR HOCKEY ASSOCIATION* AND BE MAILED TO THE ABOVE ADDRESS OR BE DROPPED OFF DIRECTLY AT THE HOCKEY OFFICE. CLINIC SPACES ARE LIMITED AND WILL BE FILLED ON A FIRST COME FIRST *PAID* BASIS. 48 HOUR NOTICE REQUESTED IF UNABLE TO ATTEND OR FEE WILL BE KEPT, NO EXCEPTIONS.**

RESPECT IN SPORT/SPEAK OUT & TRAINER/TRAINER REFRESHER
ARE NOW AVAILABLE AS ONLINE CLINICS.

VISIT OMHA WEBSITE: WWW.OMHA.NET LOOK UNDER CLINCS FOR INFO

OFFICE USE ONLY:

PAYMENT RECEIVED: \$ _____ DATE: _____ CHQ# _____