

Center: Team Contact:		OMHA Category/Division Cell Phone #	Circle One U9 U11 U13
Address: Postal Code: E-mail Home Color:		Fax # Team Name Away Color:	
Signatures are NOT to be entered until official registration at the TOURNAMENT.			
Sweater#	PLAYER'S NAME(Please Print)	Position	Signatures required at tournament
		1	
		1	
		1	
Position	Please Print	S	ignatures required at tournament
Coach			
Trainer			
Manager			
Asst. Coach			
Asst. Coach or Trainer			