

# 2011 HUB CITY YOUTH HOCKEY TOURNAMENTS

## REGISTRATION FORM

Divisions	
<b>MLK Jr. Weekend</b>	
<b>Peewee B - January 15th - 17th - \$700.00</b>	

Team Name:	Roster	
Division you are entering:	PLAYER NUMBER	PLAYER NAME (First & Last name)
Managers Name:		
Address:	1	
City:	2	
State:	3	
Zip Code:	4	
Home Phone:	5	
Work Phone:	6	
Cell Phone:	7	
Email Address:	8	
Please make checks payable to: <b>Hagerstown Youth Hockey Assoc.</b> or Pay by Credit Card	9	
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Card #:		
Type:	VISA      Mastercard	
Name on Card:		
Expiration date:		
Signature:		
	HEAD COACH	
	ASST. COACH	
	ASST. COACH	
	ASST. COACH	
	MANAGER	

Please mail completed application, USA Hockey team roster, USA Hockey Sanction Number, and registration fee made Payable to Hagerstown Youth Hockey Association to:

**Hagerstown Youth Hockey Association**  
**580 Security Road**  
**Hagerstown, MD 21740**  
**Attn: TOURNAMENT**

\*\* Your team will be added to the tournament only after all documents and payment has been received and accepted by the tournament committee. Any changes to the submitted documentation must be requested in writing and will be reviewed on an individual basis by the tournament committee.

Please direct questions to: **Jeff Biggs**  
 hubcityclassic@hagerstownhockey.com