

Strathroy & District Minor Hockey Association

Gemini Sportsplex
667 Adair Boulevard
PO Box 142
Strathroy, ON N7G 3J1

Home of the Jr. Rockets



www.sdmha.org
registration@sdmha.org
Phone 519.245.0560
Fax 519.245.5349

2014 - 2015 Season Goalie Development Clinic Registration Form

Questions? Call (519) 245-3148 or Email: development@sdmha.org
Mail or Drop-off Completed Form and Payment of \$75 by September 21, 2014 to:
Jamie Bright – 102 Steven Street, Strathroy, ON N7G 4K9
Cheques Made Payable to S.D.M.H.A.

Player Name: _____

Date of Birth: _____ Gender (M/F): _____

Years Playing Goalie: _____ Division: _____

Emergency Contact: _____

Contact #: Home: _____ Work: _____ Cell: _____

By signing below you are acknowledging that your child is a registered player with the Strathroy & District Minor Hockey Association (SDMHA) for the 2014-2015 Hockey Season and that you are agreeing to adhere to the rules and regulations of the Ontario Minor Hockey Association (OMHA) and the Strathroy & District Minor Hockey Association (SDMHA).

Parent's/Guardian's Signature: _____ Date: _____

For Registrar Use Only:

Fee Received:	\$75 Reg. Fee Paid	Cheque # or Cash	Receipt Given
Registration Fee			