

RANGERS

SPRING PROGRAM

3 on 3



2023-2024 EXCELLENT ICE Registration Form

Please print clearly

Player's First & Last Name: _____

Minor Hockey Association played for in the 2022-23 season: _____

Birth Date: _____ Gender: Male Female Prefer not to say

1st Guardian's Name: _____ 2nd Guardian's Name: _____

Address: _____

Telephone: Home: (____) _____ Cell: (____) _____

1st Guardian's Email: _____

2nd Guardian's Email: _____

JERSEYS Jersey Size _____

PAYMENT DETAILS:

Payment Method: CHEQUE CASH MASTERCARD VISA

Player cost: 2018/2019- \$1150.00 including tax

Player cost: 2015/2016/2017 - \$1375.00 including tax

Terms and Conditions I hereby authorize Excellent Ice to charge my credit card for Full payment. I understand that I am purchasing the Rangers program in its entirety, and all classes and camps are to be taken as specified. Camps/clinics are specifically designed especially for the Rangers program and therefore I understand I cannot deduct or substitute programs due to scheduling conflicts. I understand there will be a \$25 administration fee for insufficient funds/returned payments.

Signature of Acceptance of Terms: _____

Card Number: _____ Expiry Date: _____ / _____

Name on the Card: _____ Signature: _____